

"... the illegal use of billions of these pills has flooded the country and reached epidemic proportions."

Senator Thomas Dodd

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The Menace Of PEP PILLS

BY WARREN SMITH
AND EUGENE OLSON



L.M.

**Because this book is unafraid to
publish such statements as:**

*"We will never forget what we saw.
That woman, and those three boys, all
high on liquor and narcotics — that's
what those pills are. One of the boys
was —"*

*Illinois State Senator
Arthur Swanson*

and:

*Many truck-drivers would be horrified
to learn that they have done more than
any other group to popularize, propa-
gate and propagandize the cause of
illegal pep pill sales.*

**you will not be able to put it down
until the very end!**

**The
Menace
Of**

**PEP
PILLS**

BY WARREN SMITH AND EUGENE OLSON

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Foreword

This is a book about the new drug addicts.

The misuse and abuse of drugs in our society is not a new problem, but the spread of drug addiction to middle class society is.

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The image of the "pusher" as a shoddy representative of organized crime has been replaced by the smiling, well-scrubbed visage of the high-schooler who peddles pills to his classmates after school or the well-meaning truckdriver who slips a handful of "bennies" to a buddy to help him "stay awake on that long haul."

The stereotype of the pitiful, wild-eyed degenerate who steals, prostitutes or kills to feed his habit has been replaced by the familiar forms of the lonely trucker on an all-night run, the college student cramming for midterms or the hostess who wants to enliven her party with a "real ice-breaker."

The new addicts are the pill-heads, who take amphetamines (pep pills) for

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a lift and barbiturates (goof balls) to calm them down or to give themselves a cheap drunk.

A midnight excursion to a nervous pusher is totally unnecessary. The pills can be easily obtained in any pharmacy (legally, by prescription only) and are found in many family medicine cabinets. Illegally, they can be purchased from amateur pushers in candy stores, hamburger stands, bowling alleys, truck stops and high school corridors.

There is no stigma attached to the pills. Used as properly directed, these drugs have important medical uses as sedatives and energizers. But both file down the sharp, jagged edges of reality to those who are in flight from the Real World. All sense of control is lost to

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the pill-popper as well as all knowledge of his actions.

A junkie on heroin is usually passive, blissfully fogged into a dream-like state. He is oblivious to the world about him and only becomes violent when something stands between him and his fix.

Marijuana smokers get high to enjoy their private fantasies and intrude upon the public's privacy only when they are actively campaigning for the legalization of their "non-addictive nirvana."

Adherants of the LSD cult of inner-awareness claim lofty powers for the hallucinogen that "expands one's consciousness." LSD is extremely difficult to obtain, even for the psychologists who advocate clinical usage

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of the drug.

But a pill-head can get his happy pills anywhere; and once he has them, he is capable of anything.

He can giggle insanely while he stomps a friend's face to a bloody pulp.

He can laugh uproariously as he drives his automobile over a cliff.

He can assault, rape, mutilate, destroy public and private property, and even destroy himself without giving his actions the slightest sober thought.

A pill-head is completely intoxicated. He is totally unable to determine the consequences of his actions or their relationships to the response of others.

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A Mayo Clinic psychiatrist said recently that he is more concerned with the problem of habitual barbiturate users than with narcotic addicts.

Dr. Richard M. Steinhilber, speaking at a Kiwanis Club luncheon, reported in the Rochester, Minnesota POST-BULLETIN, said he was not in any way downgrading the seriousness of the sociological problem presented by drug addicts, "but barbiturates are of concern because they inflict deterioration to the central nervous system and body."

Dr. Steinhilber stated that barbiturate users are harder to treat than drug addicts "and with those taking barbiturates you see the whole gamut of psychoses."

"Withdrawing the addict from drugs

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is the simplest part of the treatment. Keeping the patient off the drug and convincing him he can live without it is the chief problem."

Dr. Steinhilber said withdrawing an addict from narcotics can now be done within 10 to 20 days without discomfort or agonizing withdrawal reactions, thanks to modern synthetic derivatives such as tranquilizers and narcotic substitutes.

"Most drug addicts," according to Steinhilber, "fall into three general categories -- inadequate or dependent personalities who are immature in emotional make-up; individuals with character disorders, often found among professional and intellectual people, and a general broad category of psycho-neurotics."

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Amphetamines and barbiturates have come to be called the "dangerous drugs" to distinguish them from narcotics.

They are doubly dangerous because of their cheapness and availability to young people.

"It's the kids who are hooked on goofballs that really make me sick," said a law enforcement officer in the Detroit area. "It's so easy for them to get started. Hell, they can buy 'em for a nickel. They're as cheap as candy."

The pills may be "cheap as candy," but a point that will be made again and again in this book is that pills are big business. FLEET OWNER, a trade magazine of the trucking business, estimated in May, 1964, an annual trade of \$200,000 to \$400,000 in illegal

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pep pill sales.

Many truck-drivers would be horrified at and offended by the charge that they have done more than any other single group to popularize, propagate and propagandize the cause of illegal pep pill sales.

But many of them have also learned by near-fatal experience that pep pills don't really allow one to drive all night without missing the lack of sleep. They have learned that the pills only "borrow" energy that the reserves of the body might not be able to spare. They have suffered through the dizziness, the nightmares and the terrible hallucinations that often beset the pill-popper.

College students have also done their share to spread the doctrine of

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the pep pill and the gospel of the goof-ball.

"Our whole dorm uses 'em during test week," a student from a Midwestern University told us. "How else is a guy going to be able to study for test after test if he can't pop a pebbie in his mouth? Man, there is just so much to read and cram -- especially if you've been diddling around half the semester."

"And then," put in his buddy, "half of the fellows have to take goofballs to quiet down after exam week. Sure, a lot of guys still go out on beer busts and get bagged to settle down, but quite a few are using goof balls. They have about the same effect, you know."

It is obvious from the off-hand manner in which these students replied to

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our questions that the awful thought that they might become addicted to the drugs had never entered their minds.

"Strictly speaking," says Dr. Francis J. Braceland, Psychiatrist-in-Chief, The Institute of Living, Hartford, Connecticut, "there is no such thing as a non-habit-forming drug. People can get into the habit of taking any kind of medicament. There are certain personalities who are prone to addiction. The drug to which they become addicted usually has high emotional significance for them and it may, in fact, represent the doctor upon whom they are so dependent."

Elaborating upon this assertion in the BULLETIN OF THE NEW YORK ACADEMY OF MEDICINE, Dr. Braceland said: "Any sedative, hypnotic or

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tranquilizing drug could become habit-forming for some people. The problem is not necessarily that of physical dependence. It is the problem of a psychological dependence on the use of the drug. The virtuous 'tonic' which grandmother and Aunt Minnie used to depend upon and be habituated to, usually gave them both a physical and psychological lift, for it often contained just enough alcohol to make them pleasantly and decorously squiffed.

"Addiction in psychiatric usage indicates a condition in which there is compulsive overuse of a drug to the detriment of the individual and society. Any drug which has depressant effects on the central nervous system is likely to be habit-forming, although not necessarily addicting. The same is true

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of drugs with potent central stimulating effects. Exclusive of the new stimulating drugs on which work is in progress in psychiatry, we have at our disposal the amphetamine drugs. It is well known that under some circumstances a dependence to amphetamine may develop and result in psychotic symptoms which clear up upon withdrawal of the drug. The intensity of the euphoric response to amphetamine in normal subjects has been documented by Dr. Lasagne. In normal subjects, and to a lesser degree in chronically ill patients, amphetamine surpassed morphine, heroin, pentobarbital, and placebo in its ability to produce a pleasurable state.

"It is important, then, that all tranquilizing and stimulating drugs be given under most careful medical

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supervision; one cannot urge this enough."

Just as some people cannot bear to drink alone, a large segment of the pill popping population cannot abide "pill-ing" alone.

"As a group activity it is the greatest," proclaimed a young hostess of several pill parties. "I say goof balls are the ultimate ice-breakers. A lot of stuffed shirts and party-poopers lose their inhibitions after a mouthful of pills. Then serve the drinks on top of the pills! I mean, you have a real party!"

The new addicts. Seduction of the innocent, balm for the bewildered or death for the disturbed?

What about the law enforcement

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agencies? Can't they nip the nemesis of a nation of pill-heads that seems to be looming large as the image of America's future?

Existing laws against the misuse of amphetamines and barbiturates are woefully weak. This book emphasizes Senator Thomas Dodd's long crusade to put some muscle into the flabby Federal laws. Agents of the Food and Drug Administration have also been fighting a desperate and often dangerous war against illegal distributors of pep pills and goof balls.

The new addicts. Kicks for kids, magic for the bored matron, boon for the baffled student or sickness for our society?

Dr. Braceland feels that a feature of today's conception of the "good life"

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is responsible for much of modern man's reliance upon pills. "It is the unspoken and unwarranted assumption that man is entitled, as it were, to a smooth and comfortable existence to the degree that all conflicts and difficulties be eliminated.

"Concomitantly, there is the tendency growing to view all problems, difficulties, or conflicts as symptoms demanding treatment. It may be, as it sometimes appears, that in days gone by there was too much emphasis upon dwelling in a valley of tears, but there is a tendency apparent in some quarters today, which renders people blind to the very essentials of man's being and his task. Though it ill becomes me to emulate Cassandra, I must nevertheless decry those ideas which hold that life should be free of anxiety and

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that everyone should be tranquilized. I believe that we are on the eve of a remarkable future, an awakening of the intellect and the spirit and it would be disastrous if it found us somnolent and uninterested.

"... It is definite and certain that the fountain of tranquility really resides within ourselves, and neither in stimulants nor tranquilizing drugs."

Warren Smith

Eugene Olson

THE PILL PROBLEM

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"We were laughing fit to die. We were hysterical." George Del Vecchio, commenting on his goofballed gang's brutal slaying of a 66-year-old man.

California: Pep pill arrests are up 75% over the past four years.

Illinois: The Division of Narcotic Control reports a 100% increase in drug cases. An estimated 20,000 teen-agers in Chicago take pep pills.

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Maryland: Baltimore officials report 1964 drug arrests are more than 52% above the previous year.

New York City: Drug arrests are up 33% over the last year.

On July 19, 1963, a tractor-trailer truck crashed into an automobile which had stopped for a highway traffic survey near Tipton, Iowa, killing an Air Force Sergeant, his wife, his six-year-old son and eight-year-old daughter.

The driver of the truck had three bottles of amphetamine drugs in his suitcase in the cab of the truck. He later admitted that he had been taking pep pills prior to the accident and that he had traveled over 980 miles in the 30 hours preceding the accident.

On May 3, 1964 vice raiders in Chicago arrested 48 men and youths and eight women at a lewd performance in two adjoining apartments where barbiturates and 20 empty whiskey bottles were found.

Sen. Thomas Dodd reports: "... the illegal use of billions of these pills has flooded this country and reached epidemic proportions. Illegal use of these drugs is increasing at a fantastic rate among juveniles and young adults."

In June, 1964, William Haniak, 18, shot to death an 18-year-old buddy at a goofball party in his apartment in Chicago. He told police: "I know I killed him, but I don't know why I did."

An incomplete survey of the Federal Drug

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Administration revealed that enough amphetamine and desoxyephedrine bases and salts were produced in 1962 to manufacture over 4.5 billion 10 milligram tablets. It is estimated that one half of such drugs produced are sold illegally.

The operators of and supplier of a syndicate making wholesale distribution of amphetamine, "pep-pill", drugs to truck stops through the southeastern United States were convicted in 1961 and received two and three-year jail sentences. Millions of tablets were involved in this operation. Over 600,000 goofballs were seized from the supplier when an undercover buy was made from him.

In November 1962 nearly one million amphetamine tablets were seized in multiple raids over three states. FDA and Tennessee investigators arrested one illegal peddler of pep pills who offered to sell them a half million tablets at one time.

On March 11, 1965, the House passed 402-0 a bill aimed at bootleg traffic in pep pills and goofballs.

The bill is designed to tighten federal control over distribution of depressant and stimulant drugs and to increase record-keeping and inspection requirements from manufacturers through sellers.

The measure, currently before the Senate, was asked for by President Johnson.

On July 15, 1964, President Johnson stated:

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"Narcotic and other drug abuse is inflicting upon parts of the country enormous damage in human suffering, crime and economic loss through thievery. The Federal Government, being responsible for the regulation of foreign and interstate commerce, bears a major responsibility in respect to the illegal traffic in drugs and the consequences of that traffic. That responsibility is shared by several departments of the Government and by a number of divisions, bureaus, etc. within them. I now direct those units to examine into their present procedures, to bring those procedures into maximum activity, and wherever necessary put into effect additional programs of action aimed at major corrections in the conditions caused by drug abuse. I desire the full power of the Federal Government to be brought to bear upon three objectives: (1) the destruction of the illegal traffic in drugs (2) the prevention of drug abuse, and (3) the cure and rehabilitation of victims of this traffic."

The House broadened the bill's prohibitions on selling or giving a depressant or stimulating drug to anyone under 21. The age had originally been set at 18. The amendment was designed to include college-age youngsters.

Perhaps it will be impossible to completely stamp out the bootlegging of barbiturates. But somehow goofballs must in the future be kept out of the hands of such violent youths as George Del Vecchio, Joseph Anthony Varchetto and Eugene

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Peter Waswil.

"I shot the old guy four or five times," George Del Vecchio told Michael Spiotto, deputy chief of detectives, Chicago police. "But Joe and I just couldn't shut him up. He just kept on screaming. And we kept kicking him in the head to shut him up. He kept yelling so I fired another four or five shots into him."

With brutal frankness the 16-year-old slayer told police how he and two buddies, Joseph Varchetto, 16, and Eugene Waswil, 17, beat and shot to death 66-year-old Fred A. Christiansen who had left his home to buy a pack of cigarettes.

"This was a case of a savage attack that angered our whole city," Mayor Daley told reporters.

"It was wild, man," the young toughs told police. "We just couldn't stop laughing. The way he flopped around. We were laughing fit to die. We were hysterical."

This startling confession, punctuated with intermittent bursts of laughter, shocked Chicagoans on January 31, 1965. The giggling young killers were high on barbiturates, they could view their senseless crime only as a scene of hilarious comedy.

"We had been taking two or three pills a day for the last couple of months.

"Then this Puerto Rican cat came around and tried to push us some Tuinals. They're blue and red and really light you up. The fellows call 'em

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Christmas trees. He wanted a dime apiece for them.

"We told him to flake off; then, while a couple of us kept him busy, one of us busted into his car and stole the whole bottle. There were more than 100 pills in it!"

Two nights later, the pill-happy youths decided to holdup a store for some quick cash. "We had swallowed a handful each and were really living.

"But the old lady got tough. She wouldn't give George the money.

"George started screaming: 'Give me the money'; but the old lady told him to get out. She wasn't even afraid of his rifle."

Mrs. Bernice Dorff's bravado nearly cost her her life.

According to Varchetto: "George cut loose with the rifle. He just kept pouring bullets out of it and none of them hit her. They were bounding off the shelves all around her. He seemed to lose his head and I had to grab him to get him out of there when the old man came out with the pistol."

Edward Dorff fired two shots at the young toughs in the store, fired three more as he chased them on the street.

Only the fact that Del Vecchio was on goof-balls saved Mrs. Dorff's life.

"I kept seeing two women," he told police.

Later, still high on the barbiturates, Del Vecchio laughed aloud when Mrs. Dorff identified him as the youth who had fired 10 times at her

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with an automatic .22 rifle.

After the attempted holdup, the three rode around in a stolen car looking for another robbery victim.

"The day before we had rented an apartment and paid the first week's rent of \$30 with money that George had borrowed from his grandmother. We needed more bread -- fast."

Then they spotted Christiansen.

"We pulled the car into an alley to intercept the cat and started to argue about who would handle the rifle."

Varchetto told Del Vecchio: "You saw him; you take the gun."

"The next thing I knew, I had the gun," Del Vecchio said in his confession. "Wasil stayed in the car and we got out and blocked the guy's path. He started to back up.

"Give us your money," I told him.

"He started to scream. I shot him five times and he fell. It was all funny as hell, but the guy kept screaming. I shot him six more times.

"Then Varchetto started to kick him so he would stop screaming. We both started to kick him, laughing like crazy.

"We grabbed his money, jumped back in the car.

"Varchetto giggled: 'We made a score and he got shot!'

"We were laughing our heads off.

"Then I realized what had happened. I said:

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'Don't laugh. He may be dead'."

Christiansen was still alive when his wife and daughter -- summoned by neighbors -- reached his side.

"Some boys jumped me and robbed me," he managed to gasp just before he died.

The youthful trio of hopped-up hoods were still laughing when police arrested them.

"I think those boys should be put away and an attempt made to cure them," Christiansen's tearful widow told a reporter for CHICAGO'S AMERICAN.

Mrs. Christiansen noted that a state psychiatrist had warned the mother of George Del Vecchio three years ago that the boy "might someday kill somebody."

"If he had a police record and was on probation, why didn't the authorities see to it that he was institutionalized, in view of the warning by the psychiatrist?"

Del Vecchio had always been in trouble because of his "temper tantrums," and psychiatrists had indeed warned of "homicidal potential." Whether or not the youth's aggressive tendencies would have inevitably resulted in murder is now, of course, a moot point. The point is the fact that this boy's violent antisocial behavior was channeled into an instrument of death by the abuse of barbiturates.

PILLS ARE BIG BUSINESS —FOR THE PUSHERS

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"... and when I die, I hope to go to that great drug store in the sky."—statement from a hopped-up pep-pill addict during an interview.

The tragic case of the three Chicago teenagers whose goofball binge ended in the senseless, barbarous death of 66-year-old Fred Christiansen helped to focus national attention on the growing problem of illegal distribution of pep pills, goofballs and other dangerous drugs.

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National under-the-counter or "bootleg" sales of these pills is rapidly approaching the proportions of an explosive national scandal. Law enforcement officials report approximately 4-1/2-billion pills are sold illegally in this country each year. This is approximately half of all pills manufactured, according to FDA sources. Depending on the varying degrees of retail prices ranging from 10¢ to 50¢ -- this is a thriving industry of between \$200 to \$800 million dollars annually.

Large quantities of these drugs have been diverted into illicit channels and they're sold at truck stops, roadside taverns, bars, hotels, restaurants, service stations, pool halls, houses of ill repute and, in many metropolitan areas, on street corners by pushers. Unscrupulous doctors and renegade druggists will often furnish the user -- or addict -- with pills, for a price.

It was found by a Senate subcommittee that acute barbiturate poisoning is now the most common cause of death from any solid poison, or any other poison, with the exception of carbon monoxide.

Unlike the traffic in hard narcotics -- cocaine, heroin and morphine -- which is centered primarily in New York City and one or two other large cities in this country, pep pill salesmen can be found in small towns and hamlets throughout the country.

While there are an estimated 60,000 Ameri-

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cans addicted to the hard narcotics (Big "H", etc.) there are an estimated 2,000 to 5,000 amphetamine-barbiturate addicts in Oklahoma City alone. This was the information developed out of a House Interstate Commerce Committee hearing on the dangerous drug problem.

The witness was Dr. John B. Griffith, who is a psychiatrist and a director of the Oklahoma Mental Health Planning Committee. The youthful psychiatrist worked among goofball and pep pill addicts and attended their "spree" or "pill parties."

Griffith reported attending parties where drug users emptied the contents of an ordinary inhaler and soaked the contents in water. Shooting it into themselves intravenously, the injections were the equivalent of 30 tablets of amphetamines.

The Oklahoma psychiatrist also told the congressmen that college students are known to use pep pills to help them cram during exam time.

Griffith reported that from slum areas to suburbs, from New York to California, use of the pills can only lead to trouble and wrecked lives.

The pills are of several varieties and have many nicknames. Depending on the region of the country -- and the class of people taking them -- they may be known by the following nicknames: Red devils, yellow jackets, Waco wizards, Texas turnarounds, bennies, copilots, thrill pills, stay awakes, party pills, jump-off joes, pep pills, Christmas trees, Daylights and Darks, Hearts,

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pink paradise, Red birds, Blue Heaven, Dream Drops, fuzzy wuzzies, turn-ons, Strangeloves, water, and goofballs.

Regardless of their fascinating -- and often strange -- names, the pills fall into four categories:

AMPHETAMINES: These pills have many unusual nicknames: bennies, copilots and thrill pills. But whatever their common name, there is serious danger in uncontrolled use.

The amphetamines, benzedrine and dexedrine, primarily, are useful in treating certain illnesses when used under doctor's supervision. Carelessly used, they can endanger both the user's and society's welfare.

Legally, amphetamines can be sold only by a doctor's prescription, through a licensed drug-gist. But they're the most popular of the pep pills and raids by investigators have turned up illegal caches of 1/2-million or more pills.

Common beliefs about these pills are: they are harmless as a cup of coffee ... they're great for driving without sleep ... they give the user extra energy. These are dangerous assumptions.

True, amphetamines will increase alertness and efficiency for a short time; this may be followed, however, by headaches, dizziness, agitation, inability to concentrate effectively and irritability.

Excessive, uncontrolled use interferes with the body's warning system: those nerves that signal

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"we're tired."

The pills short circuit the user's feeling of tiredness; they burn up reserves of energy in the body. You swing today and pay the price tomorrow. Excess energy spent today must be replaced in the future. And taking pills for a prolonged time -- there are cases of users being hopped up for several days -- can result in sudden, total collapse of the individual.

An example of prolonged use is Bill F.-----, sales manager for an Iowa manufacturer of steel products. Faced with a competitive business situation and a personality difficulty in dealing with customers, Bill F.----- began to rely on 5 mg. heart-shaped Dexedrine tablets as his personal crutch.

"Old Bill just never runs down," his friends commented.

And ole Bill was a whiz-bang.

Hopped up on Dexedrine, you can call on customers all day, dance half the night and come roaring back in the morning -- provided the "hearts" supply holds out.

Faced with a lengthy road trip, Bill purchased a supply of pills from a service station operator in Davenport, Iowa. Go, man, go was his motto. The pills were like a generator in his guts; when the energy lessened, why, pop another "heart" and you're swinging again.

Leaving home on Sunday afternoon and driving to Decatur, Illinois, Bill popped a pill and sat

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back and let the "copilot" take over. That night, entertaining a customer in Decatur, Bill mentioned Chicago.

"I'm going up tonight," the customer said.

"I have a customer there I should call on," Bill reported.

"Come on along," said the customer.

That night, pills helped them drive to Chicago. Pills carried Bill through Monday and they "copiloted" the customer's car back to Decatur. Bill blinked, felt great and drove while his customer slept in the back seat.

They arrived in Decatur Monday midnight and Bill, still too hopped up to sleep, checked out of his motel and drove to another call in Sturgis, Kentucky. The Chicago side-trip had thrown him off his schedule; Tuesday and Wednesday he stayed on pills, making calls and driving between the towns at night.

The sudden, physical collapse came outside of Burlington, Iowa one morning at three A.M. A passing highway patrolman noticed a car in a ditch, motor running, lights on. Bill, good ole energy-filled Bill, was unconscious in the front seat.

Lucky he didn't drive himself to death.

Two days later, he woke up in a hospital room, having slept for 48 hours.

There are other cases on police files throughout the country of pill-pushed bodies suddenly collapsing. If the body doesn't go, the mind

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often starts playing tricks. Before collapse, there may be a period of decreasing physical and mental ability and alertness, even though the user feels he is doing things very well.

Another effect is seeing things that are not actually there -- hallucinations and mirages, similar to the delirium tremens of the alcoholic. Such drug-induced visions can cause a pill-popped motorist to swerve an automobile into the path of an oncoming truck -- or, as one user reported, turn off the road onto a bridge that didn't exist.

Drug bootleggers and pushers have helped to promote the common belief that pills are helpful in long hours of driving or in providing a crutch for the individual in any situation of stress. These bootleggers place personal profit above human life. Bennies can, and often do, kill.

BARBITURATES AND OTHER SEDATIVES: Barbiturates and allied drugs are useful to calm nervousness and to produce sleep in persons with medical problems. However, they're habit forming and, like amphetamines, can be sold only by prescription. Uncontrolled use can lead to addiction often more dangerous than being "hung up" on true, hard narcotics like "Big H."

Barbiturates are often "pushed" by underworld peddlers, hoping to lure an individual into experimenting with the often bizarre side-effects of the drugs. Once addicted, it is easy to switch the barbiturate user to hard narcotics and the degradation and misery that follows.

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Pep pill addicts are also frequent users of barbiturates; after excessive use of these amphetamine drugs a user may need to take sleeping pills or other sedatives to get off a "jag."

It's a vicious circle.

You get up in the morning with the stains of phenobarbital in your veins; you have what's commonly referred to as "sleeping pill" hang-over. So, you pop a couple dexedrine tablets or a 15 mg. capsule to get moving. When bedtime arrives, you're hopped up and require a couple sleeping pills to slow down.

Man, it is truly a vicious circle.

Used only for kicks, and for their side effects, barbiturates produce symptoms similar in many respects to intoxication. The user becomes drowsy and the mind is confused; muscular actions become unco-ordinated and walking or standing becomes a parody of the normal action. A walk across the room becomes a major undertaking.

Actually, effects vary greatly according to the individual. Mixed with liquor, the effects are often startling and bizarre. Alone, barbiturates can lower the inhibition level of the individual and this explains the popularity of the drugs in teen-age and hip circles. Bombed out of their minds, an apartment of people can turn into a modern-day version of the old Roman orgies.

In Chicago, an estimated 30,000 teen-agers are said to be addicts or occasional users of pep pills and barbiturates.

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In Chicago, detectives recently raided a pill and liquor party where 26 teen-agers were involved in a loud, noisy party. Detectives discovered 145 tablets of benzedrine, a well-stocked supply of liquor and an assortment of goofballs, or barbiturates. The pills had been stashed under beds, or cushions, when the raid started.

Using barbiturates for any length of time lessens effectiveness of the drug for most persons. The novice user may find a single Seconal pill sufficient for a "buzz" today; under repeated use, it may require two -- or three -- pills to achieve the same effects.

This lessening of the effects of the drug may explain the large numbers of sleeping pill deaths. It is not unusual for a user to take two pills, become drowsy, then take another pill. Unless watched, this can lead to quick death and a cold bed at the morgue.

America's sex goddess, Marilyn Monroe, was a heavy user of barbiturates; many entertainers are "switchers". A switcher, in the parlance of the pill society, is a person who goes on with pep pills and comes off with sleeping pills. One well-known rock and roll singer is addicted to "switching;" his performances are miserable exhibitions when he's off pills. They're solid, swinging affairs when he's pillled.

TRANQUILIZERS: This descriptive term is applied to a group of preparations that are, most

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often, muscle relaxing drugs that affect some reflexes and relieve mental apprehensions. Their effect is mainly on mental outlook and attitude; some are used to reduce high blood pressure. A fairly recent discovery, tranquilizers are popularly referred to as "go-to-hell-pills," because of the false sense of well-being given the user.

Tranquilizers, taken in large doses, can produce drowsiness, dizziness and other unusual side effects. Taken with liquor, the results are again unpredictable and unusual.

Under doctors' directions, tranquilizers are one of medicine's finest triumphs. Properly prescribed, they can be used to control certain psychotic symptoms; the pills can be used to help patients through stress periods of their lives. About 80% of the patients in mental and psychiatric hospitals receive tranquilizers of some type.

From the point of frequency of prescriptions, tranquilizers are high on the "top ten" list. As an example, one minor tranquilizer is consumed at the enormous rate of 50 tons a month -- or 150 million tablets annually. In a recent year, tranquilizers and energizer prescriptions (pep pills) were second only in sales to penicillin and other anti-infectant drugs.

Today, in the pill period, the era of competition and anxiety, taking tranquilizers has become the routine thing to do. One of every five Americans turns to the pill bottle to change his

Pills Are Big Business

mental perceptions and attitude. Mood medicine. If you don't like the way things are going, take a tranquilizer.

While not as dangerous as barbiturates or amphetamines, tranquilizer users can quickly build up a dangerous dependence on these drugs.

Mary H-----, 22, a housewife with immature personality, was unable to cope with the responsibilities of her marriage. She turned to one of the common psychoactive drugs as a crutch, then became discontent with the results. She started down the list of tranquilizers, trying one or another as each failed to bring Nirvana and "instant happiness."

"When Mary came to me she was a slave to these pills," reported her doctor. "She'd been buying them from a neighborhood pusher. She was lucky in that we were able to break the habit; today's psychoactive pills are some of the most potent in history. Properly prescribed, tranquilizers can be wonder drugs. With self-medication, the user can cause temporary-sometimes permanent physical injury or emotional impairment." Excessive usage can lead to permanent disability or death.

Recently the U.S. Public Health Service reported that overdoses of tranquilizers are used increasingly as suicide agents. A USPHS spokesman revealed: "It has become evident that the popularity of tranquilizers as suicidal agents now are beginning to rival that of barbiturates."

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There is growing evidence that tranquilizers, like amphetamines and barbiturates, are habit forming, if not addicting. Potentially harmful effects of these drugs are not being clearly established; they can cause liver damage and also depress the count of white blood cells.

A teen-ager, admitted to a general hospital in New York, was in a state of unconsciousness on arrival. He had been taking dosages of tranquilizers for several months. Two weeks later he died; cause: his liver was cirrhotic. The liver had been damaged from the excessive tranquilizing dosage.

There is no doubt that tranquilizers have their place in treatment of the mentally ill and the disturbed individual; it is when they end up in underground or "bootleg" channels that their danger begins.

ANTI-HISTAMINES: These drugs are used for the relief of nasal congestion due to colds, to combat allergies and other purposes. Some are purchased without prescriptions; others are too dangerous to use without medical supervision.

Side effects include confusion, drowsiness and inability to concentrate. Antihistamines are a major ingredient in the popular, easily purchased sleeping pills and compounds.

Used according to directions, the compounds have value in medicine; taken in excessive dosage (or with liquor), they provide the user with a barbiturate-like effect.

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The commercial sleeping compounds are also receiving some attention as suicide agents; one Midwest man swallowed an entire bottle of an over-the-counter sleeping compound. His life was saved only by prompt stomach pumping.

Those are the pills.

On the illegal market the most popular drugs are the pep pills and goofballs.

The illegal sale of these pills has spread with amazing speed; organized criminal rings bootleg them, covering many states and dealing in millions of tablets and capsules. As an example of the enormous profits, amphetamines can be purchased at wholesale on the legal market for less than \$1 per thousand. Wholesaled to the illicit, underground operators they go at \$30 to \$40 per thousand. They retail from 10 to 50¢ per tablet or capsule; retail price often depends on the social level of the user and the region of the country in which the purchase is being made.

It is not uncommon for a knowledgeable individual to make a "buy" of several hundred thousand pills from certain suppliers.

Pills are big business.

PILLS, THRILLS AND TRAGEDY

3

"People who describe the drug users as thrill seekers are wrong. It's not as simple as that..." Dr. Louis J. West, chairman; the psychiatry department; University of Oklahoma.

Why take pills?

Are the temporary thrills worth the possible risk of habituation or addiction? Is a drug-induced vision worth endangering your health?

Apparently many Americans think so.

We've become the most intensely pill consuming nation in history. And a large share of

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the blame for the pep pill craze lies with war-time policies adopted during World War II.

During the great bombing raids of the last war -- when the whine of propeller engines shook the ground and flight crews were at a premium -- a problem of time-in-the-air developed.

The planes were cocked and ready, loaded with explosive bombs. Skilled flying personnel was valuable.

Although it has never been noted officially, expedience overcame moral consideration, and flying crews were fed benzedrine for the long bombing runs on Germany and the Jap-held islands in the Pacific. The intense concentration of handling a Liberator or a Flying Fortress demanded peak energy from the pilot. A bombardier could not afford a mistake; otherwise the bombing run was wasted. Gunners had to be alert, eyes searching the sky at every minute. Navigators and radiomen had to man their posts with competence.

Benzedrine was the answer.

And so the nickname "copilots" was born for the drug. The old copilot would always pull you through, or so everyone felt.

You rolled out of bed in the early pre-dawn hours at a foggy, damp airport in England and before you shaved, it was time for a bennie. Wait 15 minutes and then -- man, oh, man -- into those flying suits and grab a quick breakfast and

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onto the field.

The ground crews had been working through the night, often bennied up, getting the planes ready to roll.

"She's great, baby, just great. I changed the timing round on number three and now listen to her purr," a flight chief would yell. They were talking, always talking, because benzedrine makes them talk, talk, talk.

Then, into the air, through the pea-soup of England and across the channel. Lord, look down there, country boy. That's France. Man, I wonder if we'll ever live long enough to see Gay Par-ee. Who knows, country boy? Who knows?

The moment of truth comes when the plane is over the target. Flak everywhere. Bloody, lousy puffs of smoke showing the misses. Hot Damn. OhMiGod. There goes "Dirty Gertie." A million pieces of wreckage spinning and screaming its way to earth. Remember the radioman on "Dirty Gertie?" He bought you a beer last night. You still owe the pilot \$15. What the hell. He doesn't need it now.

On in, man, shoving into that man-created hell. You come to drop bombs and you can't carry them home. There are the rail yards; that's us. Move in low, monster, move in low. Now. Bombadier, do your stuff. Drop your eggs and let's head for home.

But the German Air Force still has a few planes and their pilots have guts and their army

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doctors give out bennies or stronger stuff.

A few hours later, beat, tired, dead in mind and body, the plane lands in England. Time for bed? Who wants to sleep? Listen, Texas, tomorrow it may be our time, so let's take a pill and go into town.

At two in the morning you hire a car and get back to the base. The benny is still in your system. It's been energized and side-effected by the alcohol you've consumed. You don't want to go to bed but in three hours you're going out there and hit that run again. Milk man, keep those bottles quiet.

The solution? A sleeping pill, of course. The army doctors always have an answer to any problem. We just switch them on and off, like a light switch. Give them the bennie to keep them going; the sleeping pills to quiet them down.

Suddenly, and not a moment too damned soon for anyone, the war is over. The planes are mothballed. The crowds have quit cheering and you're mustered out with your pay and you're standing on Main Street, USA.

Mother, it is post-war time. And after all those bombing raids, all those narrow escapes and all those friends lost out there, you are gonna have some fun.

Anybody got some pills?

Let's take a pill for a thrill.

Go, man, go man, go, man, go.

* * *

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The world they fought to save was different from the one the soldier had left. For one thing, there were the Dr. Strangeloves of science; they had fashioned the A-bomb and the H-bomb. A snake was loose in the garden, and no one knew how to capture it. The world could be blown to bits at any moment and nations continue to expand their complicated, sophisticated weapons systems. Defense experts and scientists talked of "megatons" and "over-kill" and each new scare headline made the individual more nervous.

As Dr. Louis J. West reported: "Today some people have a need to turn away from the world. This is the first generation, perhaps, that comprehends the implications of the atomic age. It is the first generation that actually believes the world might come to an end in its time."

The Cold War adds nothing to the peace and security of the individual.

It is, as the psychiatrists and sociologists decree, an Age of Anxiety.

The pressures of living in a complicated society often create a feeling of inadequacy and helplessness in the individual. There are many persons without the physical or mental ability to cope with life's problems. America is the apex of civilization: the most materially-comforted nation in history. And we are a country of malcontents and neurotics; unhappy and dissatisfied, we search for the golden cup of happiness.

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There are many factors that contribute to the dissatisfactions of life in modern-day America:

A lack of meaningful labor: With the submergence of individual craftsmanship to the production line, which, in turn, gave way to the automated factory, pride of accomplishment has left the American worker. With individuality of no importance, and conformity the rule of production, there is little emotional involvement for the employee. Little interest can be generated by a shipping clerk who stuffs molded castings into an endless line of shipping boxes.

Another blow to meaningful labor and personal relationships in business was struck with the rise of large, corporate chain stores. America's Main Streets have assumed an appearance of sameness; the chain has replaced many independently-owned businesses. While a small, individual proprietor could take the time to know his personnel, the chains place total emphasis on results -- not people. The manager of a chain store in Sioux City, Iowa, is just a vague name and number in a New York office. He is given recognition only through impersonal mimeographed memos, an occasional regional meeting, when he fails to produce (and is fired) or when a pre-determined time for promotion arrives.

Our Mobile Society: The post-war rise of a vastly mobile society has wrought anxieties on our nation. This is perhaps the largest single factor in the breakdown of the family unit in our

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nation; it has led to alienation of the individual from his own peers.

Not too long ago, with families living near their relatives, it was a natural action to help those afflicted with bad luck or misfortune. Should an uncle lose his job and become unemployed, others rallied to his family's aid.

Today, Aunt Minnie lives in San Diego; Uncle Elmer is in Seattle. George lives in Opportunity, Washington, Mother is in Florida and Sam works for a feed mill in Geneva, Nebraska. Distances of hundreds, often thousands, of miles separate relatives.

In time of stress, there is no one to help; hence, the necessary rise of government bureaus, welfare and other impersonal agencies to try to perform the functions once handled by the family.

While the mobile society is sometimes an exciting place ("We're moving to Bartlesville next week"), it also results in many acquaintances and few real friends. We live among strangers in an era of non-involvement. We forego the personal consideration of knowing who lives across the street; instead, we write a check to the United Fund or sign for weekly payroll charity deductions.

More Leisure time: With full acceptance of the unions and the forty-or-less hours per week, leisure time has increased for the American. And we Americans are notably inept at handling leisure.

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"I feel there is a correlation between the arrival of our latest freedom -- free time for leisure -- and the problem of mental health," reports Dr. Peter A. Martin of Detroit, chairman of the American Psychiatric Association's committee on Leisure Time and Its Uses. "We are being forced to recognize that an increasing number of people are troubled in feeling they don't know who they are," Dr. Martin continued.

Dr. Thomas F. Green, a philosophy professor at Syracuse University, says Americans are "developing a psychological terror of leisure" because most of us look upon it as empty time. "We have the presumption that any free or non-work time must be filled with productive activity," he says.

The "Something-for-nothing" syndrome: A psychologist, Morton Schillinger, director of the Lincoln Institute for Psychotherapy in New York City reports a significant number of Americans suffer from what he refers to as the "something-for-nothing" syndrome. This is the individuals feeling that the world not only owes them a living but peace of mind, pleasure and fun as a bonus. Many believe that pills can help them realize this hope.

* * *

These are some of the causes of heavy pill consumption in America. The high rate of divorce, competitive business situations, personal problems, the inadequacy of the church to meet the

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needs of the individual are among many other of the varied reasons. Each contributes to this feeling of discontent and dis-satisfaction with life.

"It's tragic but true that more and more people are walking through life with a chemically produced filmy vial," explains Dr. Robert Felix, director of the National Institute of Mental Health in Bethesda, Maryland.

"I feel sorry for them," adds Dr. Felix.

THE FDA VS. THE PUSHERS

4

"One of the intermediate chemicals produced for the manufacturer of barbiturates is also a component for a jet engine starting fuel."—FDA staff memorandum.

The Food and Drug Administration has waged a long, bitter, and often dangerous war against the illegal Bootlegger of pep pills and goofballs.

On July 4, 1963, an FDA inspector posing as a drug peddler from the Midwest was held at gun point in Los Angeles for over five hours by an illegal amphetamine pusher who repeatedly threatened to kill him. The distributor, himself, was a heavy user of pep pills and goofballs; he

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had a criminal record five pages long.

The pusher may obtain his illegal shipment of drugs at several points in the complex chain of legitimate drug distribution from the manufacturer of the basic chemicals to the point at which the finished dosage form of the drug reaches the consumer.

According to the FDA, there are seven manufacturers of basic amphetamine and ten manufacturers of basic barbiturate. Many of the materials used in pep pills also have industrial uses. For instance, one of the intermediate chemicals produced for the manufacturer of barbiturates is also a component for a jet engine starting fuel. This intermediate can easily be converted to barbiturate powder by anyone with a basic knowledge of pharmaceutical chemistry.

FDA agents recently prosecuted two firms, Delta Chemical Works, New York, and Calbiochem, Los Angeles, for shipping stimulant drugs to unauthorized persons.

Such companies, who aren't particular to whom they sell drugs, make direct sales of large quantities of depressant and stimulant drugs to illegal peddlers.

The Physicians Drug and Supply Company of Philadelphia was fined \$8,550 in September of 1962 after pleading guilty to charges involving sales to peddlers and pushers. FDA inspectors, posing as anonymous buyers, managed to obtain 11,000 amphetamine tablets without the firm

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making any attempt to determine if the sales were being made to authorized persons.

William L. Palmer, Jr., short line jobber who was involved in counterfeiting and illegal sales of stimulant drugs obtained the following quantities of pep pills to carry out his illegal peddling.

From a Detroit firm, 8 million tablets in a nine-month period in 1962 and 1963.

From a small manufacturer in Union City, New Jersey, over half a million tablets between December 1961 and September 1962.

From a manufacturing firm in Greenville, North Carolina, over 2 million tablets.

About 3 million tablets from two firms, one in Chicago, the other in Philadelphia. The Philadelphia firm also shipped Palmer 150,000 barbiturates.

Palmer was convicted of violating the Food, Drug and Cosmetic Act and was sentenced to three years in the penitentiary. A criminal prosecution is pending against the Philadelphia firm.

Theft from manufacturing plants and from interstate shipments is another method whereby the pusher obtains vast quantities of drugs for his illicit trade. It also helps to have a friend on the inside of a large plant.

In April 1964, an informant arranged a contact for a FDA undercover agent with Bob Marshall, a known hoodlum in Kansas City. The agent purchased a bottle of 1,000 barbiturate tablets from

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Marshall and managed to jot down the peddler's license number.

The plates were checked out and the car was found to be owned by a shipping clerk at a local Squibb warehouse.

Marshall made a second sale of 5,000 tablets to the agent, who began talking of making a "really big buy." The hoodlum agreed, made arrangements for the undercover inspector to pick them up at his apartment.

Because of the thug's criminal record and his hostility, the FDA inspector solicited the help of the Kansas City Police. They raided his apartment and seized 48 bottles of phenobarbital tablets. The bottles were identified as a Squibb product. The shipping clerk, under questioning, admitted stealing them. He was prosecuted in county court and his sentence is currently under appeal. Marshall was convicted by county court and is now serving a four-year sentence.

Unscrupulous drug salesmen manage to pick up fast money by invoicing large quantities of drugs to fictitious physicians and druggists or by intercepting shipments to existing accounts when they reach shipping terminals. The salesmen are then free to either peddle the drugs themselves or sell the shipments to pushers in truck stops, candy stores or college campuses.

Harry W., 45, was a drug salesman for a large manufacturer before he decided to enter the world of underground drugs.

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"It wasn't that the company didn't pay me enough. I've just never been a very good manager, I guess.

"You see, I'm on the road a good deal. Always have been. Now I've never been an away-from-home lecher and spent my time shacking up with babes, but I do like to play cards. Over the years, I got hit by some pretty big losses, but I always managed to pay up and my wife never even found out about them. I always told her I would just play with a bunch of other salesmen for matches.

"But now I've got a kid in college. And, brother, that takes money. I want the kid to have all the dresses and sweaters and like that, but I wasn't about to give up playing cards with the fellas.

"Then I really got smashed one night. Lost \$1,600. That would be hard to cover even if the daughter wasn't going to college!

"Everyone on my route knew that I was a drug salesman. Guys who owned truck stops and all night diners had been after me for a couple years to supply them with pep pills. I always thought that they had just been kidding me, but I decided to try them and see if they were serious. They were. They were deadly serious.

"It was easy. I got a couple post office boxes in a couple cities on my route and invented fictitious doctors and pharmacies to receive the shipments. I was really pulling in the loot until

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the FDA nailed me. Now I haven't got anything. Not even a job."

In June 1962, an inspector received a tip from an Internal Revenue agent that an Indiana motel owner might be dealing in illegal drugs. The suspicion was based on a number of checks written to drug salesmen.

The inspector, posing as a truck driver, made a number of pep pill buys from the motel owner. He was also introduced to two brothers who were salesmen for a drug company and was able to make buys from them. The brothers indicated a strong desire to supply drums of 25,000 amphetamine tablets at a price of \$625.

Drug salesman, Stephen Kabala, Jacksonville, Florida, was employed by a St. Petersburg wholesale drug house. In the course of his regular business, he supplied several truck stops in the Carolinas with amphetamines and barbiturates. He also supplied a string of drug peddlers.

An FDA agent was able to purchase 399,300 pep pills and barbiturates from Kabala who was subsequently convicted and sentenced to three years in jail and three years probation.

Inspectors disclosed that Kabala had ordered the merchandise for his illicit operations directly from the manufacturer in the wholesaler's name. Shipments were made to fictitious drugstores where Kabala would obtain merchandise from the truck terminal.

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De Witt Clinton Bowman, trading as Carolina Drug Associates, Salemburg, North Carolina, sold an undercover agent 81,000 tablets during a four-day period.

Bowman operated under an expired State License but had managed to purchase 4,196,000 pills from a Philadelphia firm during a 14-month period prior to March 1961. Over half a million pep pills were found in his possession. He had been supplying drugs to another large illegal distributor in Georgia and several truck stops and drivers.

"There was really nothing to it," shrugged one such illegal buyer of drugs. "I just put M.D. after my name and no company never asked any questions at all. I had myself a real good thing until I sold 6,000 tablets to that FDA inspector. The fink told me that he owned a truck-stop and would be a real good market. Big deal! He closed me up for good!"

In June 1963, an FDA District received a call from State police reporting a barbiturate suicide. The victim had been a barbiturate addict who at one time had committed himself to a New York hospital to overcome his addiction. By representing himself as a medical doctor, he had been able to obtain large quantities of barbiturates from a small New Jersey distributor.

The final order placed by the victim was for 20,000 phenobarbital sodium capsules.

Edward M. Harvath, an employee at Western

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Electric Co., Baltimore, Maryland, in 1960 engaged in the peddling of amphetamine tablets, barbiturates and other drugs to employees. He was assisted by a woman employee, Anna Henniger. The drugs had been illegally obtained by a pharmacist, Manuel Highkin, from a Baltimore drugstore where he was employed.

A criminal action, which included conspiracy charges, was filed January 19, 1962, in Federal Court. Nolo contendere pleas were entered and the defendants were sentenced March 30, 1962. Hovarth and Highkin received three months' imprisonment and fines of \$250 and \$750 respectively. Mrs. Henniger was sentenced to one year, suspended, and placed on probation.

"I was pocketing between \$75 to \$100 extra each week before I got scared and dropped the business completely," confessed an employee of a Baltimore paper plant. "You see, my brother-in-law is a pharmacist and he used to give me some pep pills when I had the night shift. It didn't take long before the guys noticed how much more alert I was.

"When they found out that I was taking pep pills, they all wanted to buy some from me. They figured we could really up production, probably get ourselves raises. I talked to my brother-in-law and we worked out a deal. I mean, the guy's got five kids. Who can blame him?

"Then one night, a couple of the fellows who had been out bowling the night before started

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tossing pills into their mouths like they were peanuts. They pepped up all right.

They damn near went berserk. Then they started seeing things that weren't there, and one of them nearly got his hand in a paper cutter. We rushed them to the showers and I swore I'd never take or sell another pep pill."

In May 1964 the general safety manager of a large trucking firm reported to FDA that amphetamines and barbiturates could be purchased at a certain area in Chicago from a woman known as "Big Linda."

Two FDA inspectors made contact with the woman and made buys of 5,000 pep pills. One of the inspectors identified himself to "Big Linda" and she agreed to cooperate. Her source was a drugstore and an order for 100,000 amphetamines was placed with the owner through "Big Linda."

On October 14, 1964, the merchandise was seized after it had been delivered to two lockers in the Illinois Central Railroad Station. Discovering only 98 bottles containing 1,000 tablets each in the delivery, the inspector and "Big Linda" went to the drugstore to complain.

The owner was not present, but an employee, when confronted with the claim, promptly gave them the two additional bottles.

Pep pills also enter the illegal trade through unscrupulous physicians, other licensed practitioners or their opportunistic office workers.

On August 10, 1961, Dr. Leroy E. Callahan was

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arrested in a tourist cabin in De Queen, Arkansas, by a United States Marshal. Acting under a Federal court order, the Marshal seized 200,000 amphetamine tablets which Dr. Callahan was delivering to an undercover FDA agent.

Dr. Callahan was carrying a pistol and two rifles were found in his automobile.

It was later determined that Dr. Callahan had purchased over 360,000 amphetamines from two Eastern drug distributors in one month. He was fined \$1,000 and given a suspended two-year prison term in the Federal District Court at Texarkana for the unlawful sale of the drugs. The Arkansas State Medical Board revoked Dr. Callahan's license because of the unlawful sale of amphetamines.

The Carroll Chemical Co. of Baltimore, Maryland, had supplied small quantities of drugs for years to a Baltimore psychiatrist. During the summer of 1964, Management became suspicious when the frequency and size of orders the psychiatrist's office increased by giant steps.

FDA investigators discovered the psychiatrist's assistant, a woman, and her boy friend actively engaged in illicitly peddling pep pills and barbiturates. They had used the doctor's prescription blanks to order over 200,000 drug tablets at the chemical company.

Shortly before the trial, the woman committed suicide by taking an overdose of barbiturates. On September 2, 1964, the boy friend was acquitted

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since the doctor's assistant could not testify.

A 17-year-old son of a Hagerstown, Maryland policeman was hospitalized following an overdose of "diet pills" sold to him by Dr. Ralph Young of Williamsport.

Police investigation discovered several youths and local undesirables obtaining drugs regularly from Dr. Young. FDA inspectors made frequent buys of pep pills from Dr. Young and witnessed several teen-agers making purchases. Dr. Young was fined \$5,000 in Federal Court.

Investigation determined that a number of university students from Michigan colleges were ordering and receiving pep pills from Dr. Ambrose Schneider. During a six month period, two inspectors purchased, through the mails and personal visits, over 6,000 amphetamine tablets. A check of the doctor's office records disclosed that he had purchased and distributed over 600,000 pep pills during 1962. It was estimated that he had approximately 1,000 customers, many of whom were college students.

A female student, who had been supplied pep pills by Dr. Schneider, became addicted to amphetamines and forced her to drop out of college for a lengthy period of hospitalization.

Dr. Schneider pleaded guilty in Federal Court on December 20, 1963, and was fined \$1,500 and placed on probation for two years.

"We have an almost incredible investigative job on our hands," said an FDA inspector. "This

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whole drug situation is like an enormous ball of yarn. Where does it start? Where will it end? There are so many people taking pep pills and so many talking about trying them, that a lot of drug salesmen, physicians and druggists become enticed by the enormous illegal profit to be made and degrade themselves by becoming pushers.

"Look, the pills are produced at the average cost of about \$1.35 per thousand and sold to druggists for about \$3 a thousand.

"Pushers start selling the pills to teen-agers at 5 or 10 cents a capsule. As the kids get to needing them more often and in larger amounts to get a buzz on, the price is increased to 25 or 50 cents a pill. And some teens need up to 20 pills a day!"

To demonstrate the great profit -- and ease -- in obtaining pep pills and goofballs, a New York City TV executive recently rented a Manhattan office under an assumed name.

Without credentials, he sent letters requesting barbiturates and amphetamines to 24 pharmaceutical firms in 11 states across the nation.

Seven drug companies filled the orders without question.

By return mail he received more than a million pills and tablets.

FDA authorities estimate that these pills would bring in at least half a million dollars in illegal sales.

The executive's total purchase cost was \$562.

SUBURBIA: **PILLS IN PARADISE**

5

"Having plenty of happy-pills is the surest way I know of becoming a big man with the in-group." Statement received during interview with a teenaged goofball addict.

"The fact that it's dangerous is the biggest part of the kick, man," a young man hooked on barbiturates said recently.

The pep pill has invaded the suburbs; the "nice kids," the "best youngsters from the best families" are taking bennies on weekend parties

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to become "real swingers."

Thou shalt not be a chicken is still number one in the Ten Commandments of the teen-ager.

Some of them take drugs regularly in order to get high. "Way high, man! Way up above all your problems. You just soar out there and look down on the world. Things don't seem so gosh-awful bad when a guy is way up there."

And some of those who soar "way up there," never come back. They get hooked.

"I've tried them all," says Fred, a 16-year-old from a large New Jersey high school. "When I was thirteen, a buddy of mine was over to the house and we were putting together some model airplanes.

"I asked my buddy if he had read those articles in the Sunday papers about kids who were sniffing glue for kicks.

"He said, 'No. Who the hell would wanta sniff glue?'

"I said, 'Why man, don't you notice the neat smell it has. I bet it would really work on a guy if he really sniffed it hard.'

"So we tried it. It worked, too, but my buddy threw up.

"I guess we stopped then and were probably lucky. I read later about how some kids ruined their lungs and their brains and their noses and what-all.

"But I liked the way-out feeling I got from sniffing glue. George was more of a swinger than

Pills In Paradise

my other buddy, and I told him what we had done.

"He said that glue-sniffing was too dangerous. We should try drinking cough medicine.

"Now this really tossed me. Mom had a hard enough time making me take a teaspoonful at bedtime.

"But he showed me how it said on the back about it being habit-forming and containing an opium derivative.

"I started out drinking three-quarters of a bottle a day to get high. After I got used to the terrible taste, that nice glow in my belly really felt good. I get a good high-on with a bottle of cough medicine. Wasn't long, though, before I had worked up to three bottles a day. I figured I better switch to something else or the folks would start wondering about all those empty bottles.

"George and I tried the nutmeg-bit next. Man, that is something! Just take ordinary nutmeg right out of your mom's cabinet, put two teaspoonfuls into a glass of milk and swig it down. What a buzz! Tastes good, too.

"You're way out there on Cloud Thirteen. It's all like in a dream. Your heart pounds like it's trying to bang a hole in your ribs and your face gets red as the devil's. Later, all you want to do is sleep. Just plop down and conk out. Turn off the switch.

"That's the trouble. The high lasts too long. My folks caught us and really gave us hell. We

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promised we'd never try nutmeg again. And I only did once again at another friend's birthday party. There were some girls there, too, and it was funny as hell.

"But we went back to cough medicine for another year. It was about six months ago when these guys gave us some goofballs. Man, have we been swinging ever since!"

Fred admitted that he realized the potential harm to his physical and mental health that could result from his "experiments in ecstasy." He laughed and said that "no swinger ever worries about tomorrow, man!"

The dangerous and illegal "kick" appeals to certain emotionally immature adolescents. For thousands of teen-agers across the United States, pep pills, goofballs and related barbiturates offer the newest and wildest kick.

Giving a Goof "Ball" is the surest way of impressing the in-group.

Accepting an invitation to a pill-party is the ultimate in expressing defiance to parental authority.

"Hell," a sophisticated 17-year-old named Betty said. "I've tried everything else!"

And a startling number of today's teens have. Booze parties without pills are square. Sex talk and even sex play is a matter of course for many suburban sophisticates. Surfing is okay if you live on the coast. So is drag-racing if you can afford a souped up heap. But anyone can dig

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out a dime for a pill.

"Nothing tears me up like seeing these kids hooked on drugs," a longtime member of a large metropolitan narcotics squad said recently. "But what can we expect them to do? Most of their parents are drinking it up at some cocktail party, not giving a damn where their kids are or what they're doing."

Irving Abrams, M.S., in his nationally syndicated column YOUR CHILD'S HEALTH, wrote recently: "The boys and girls who indulge (in dexedrine and seconal) are fearful of facing their everyday problems on their own. They need the drugs to cloud their brains so they will not need to worry for a few hours or so. The drugs occasionally open the door to narcotics."

Numerous authorities have noted the fact that in most cases of youthful drug addiction in the suburbs, the teen has come from a home in which the parents are too lax in discipline and too generous in bestowing material gifts.

The parents may be conscientious but too wrapped up in their own social life and civic commitments to spend much time with their children.

Several parents of pep pill addicts admitted putting too much pressure on their children to do well in school.

"I can see now that I was leaning on Bill just too hard," confessed one father in sad retrospect. "But I wanted him to be a National Merit

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Scholarship winner! College today is a lot tougher than when I went. And it costs a hell of a lot more, too. It is important for a high-schooler to get as many scholarships as possible."

"I had nearly straight 'A's and my virginity when I was a junior in high school," said Alice, an 18-year-old Los Angeles senior.

"Since fifth grade Mom and Dad had been on me to knock down all the biggest scholarships. Mom had been valedictorian of her dinky small-town graduating class of '35, and she always insisted that I could do the same in my class of 700!

"But booking never presented any particular sweat for me until I got big enough to want to go out and play 'kissy-face' with some of the guys. Jack started making maneuvers for me and pretty soon we were going steady.

"The folks weren't upset, I mean, they wanted a girl who was socially adjusted, too. But Mom laid it down in no uncertain terms that if my grades started slipping, back went Jack's ring and dates would be limited to Saturday nights.

"That's when I started on the pep pills. I'd get home from a 10:30 date and have a physics assignment, an English theme and three chapters of sociology to read. No strain. Pop in a dextie and hit the books. By 3:30 or so I'd be finished, but by then I'd be too hopped up to sleep.

"Now, I don't want you to think I got bombed out of my skull every night. Only when it was

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necessary. Only when Jack and I had had a heavy date and I needed to knock off my school work.

"Eventually, though, we started to fall in with the kicks-crowd. I mean, what the hell, we were big sophisticated seniors now. Another year and we were going to be on our own in the big old world. We were all grown up and ready for all the pleasures that had been stuck up on that shelf labeled "Adults Only."

"We double-dated with this guy who could get marijuana. We'd roll up the windows so we would inhale as much smoke as possible and then sit and 'blow pot.'

"It wasn't long before we thought we just had to try a real pep pill and goofball bash. Three of us couples got together one night for a beach party. The guys brought booze and plenty of pills.

"Someone said that to really get turned on, you should take both peppies and goofers at the same time and wash them both down with a can of beer.

"Man! He was right. My brain felt like it was smogbound. Jack and I started to smooch it up and neck like crazy. By the time he got around to asking that same Big Question he had been asking for months, my inhibitions had long since been bombed into retreat. I don't remember what I answered, but it must have been affirmative.

"The next day I looked in the mirror and saw that losing my maidenhood hadn't really changed me into a withered, ugly old hag. The only thing that really bothered me was that I knew Jack

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hadn't been the only one."

A deputy sheriff in southwestern state reported: "We broke up a wild party of teen-agers at one of the old ghost towns out here. They had plenty of pot, "H" and dozens of bottles of pep pills and goofballs. When we emptied the girls' purses, we found that they had been raiding the family medicine cabinets for still another kind of pill -- birth control, that is. The fellows all had contraceptives."

The Senate Subcommittee To Investigate Juvenile Delinquency found that during the last five years, the illegal use of the billions of amphetamines, barbiturates and other psychotoxic drugs which have flooded this country, have reached epidemic proportions. The Committee listed these results of the traffic among teen-agers:

The illegal use of these drugs is increasing at a fantastic rate among juveniles and young adults.

The use of these drugs has a direct causal relationship to increased crimes of violence.

The use of these drugs is replacing, in many cases, the use of the "hard" narcotics such as opium, heroin and cocaine.

The use of these drugs is more and more prevalent among the so-called white-collar youths who have never had prior delinquency or criminal records.

The use of these drugs is increasingly identified as a cause of sexual crimes.

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After participating in a goofball raid that resulted in arrests of suspected narcotics users, Illinois state senator Arthur Swanson told reporters:

"We will never forget what we saw. That woman, and those three boys, all high on liquor and narcotics -- that's what those pills are.

"One of the boys was unconscious -- it took him four and one half hours before he even realized where he was.

"The average citizen just wouldn't believe that these kids can become just vegetables, no human beings, as this one boy in particular was. It is the filthiest, most devastating habit any young person can engage in.

"They start out on pep pills and goofballs. It becomes a habit. Then they take to the harder stuff, the more potent narcotics -- and they are on the road to hell."

Chicago police recently seized heroin, marijuana, goofballs and pep pills in a raid where eight men and eight girls were having a loud party.

The oldest girls were 18; the youngest 13. The men ranged from 17 to 27. Five of the girls were under 17. Three of them had been missing from their homes for more than 24 hours. One was listed in police missing persons reports.

"We blame greedy landlords of cheap, furnished flats for a good share of these wild pep pill parties," commented a police official. "They

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close their eyes to what is going on in their buildings, even if the tenants are adults who give sex and dope parties for minors."

A youth who had just been arrested in a raid involving 30 teen-agers in a "respectable" New England community said: "Man, we get us a ball and we just keep it rolling. As long as we got babes, booze and bye-bye pills, we just keep a going."

And some of the wild balls "roll" for as long as a week.

Police in Park Ridge, Illinois recently brought charges of illegal possession of dangerous drugs against a 38-year-old divorcee who hosted 10 young men and women during a six-day party which included gin, pep pills and goofballs.

Los Angeles County has perhaps the worst juvenile narcotics problem in the United States. In 1962, more than 1,000 juveniles were arrested for drug offenses; 104 died from extreme dosages of narcotics and other dangerous drugs.

Commenting upon the blind spot many parents develop in relating headlines to their own household, Dr. Ida Jiggetts of the New York City Health Department said: "Many parents deny the problem for months, even a year, before they seek help. The parents become guilt-ridden, self-deprecating and ashamed. Often one of them becomes more disturbed than the drug user himself. One of the myths about narcotics is that the user always comes from a broken home.

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Very often that is not the case."

Although the suburban teen who is hooked on happy pills may receive more condemnation among certain "square" members of his peer group than his slum counterpart, the "white-collar" teen will find it easier to obtain money for feeding his habit.

"Hell," said one cluttered-alley addict in a large Eastern city. "Some of the rich pillbugs I know buy Christmas trees with allowance from Mommy and Daddy. Me, I gotta steal. I burglar gas stations, supermarkets. I even mugged some old guy once. I don't get to hock my old lady's silverware for loot for launching pills. I gotta get my Cape Kennedy capsules the hard way!"

In a prepared statement on the control of psychotoxic drugs for the Subcommittee on Health of the Committee on Labor and Public Welfare of the United States Senate, Randel Shake, Director of Nation Child Welfare for The American Legion, said: "Like many other drugs, the barbiturates and amphetamines and their derivatives are a paradox. When used properly and under medical supervision they can be of great assistance to individuals but when used indiscriminately and without proper supervision, they can at the same time degrade mankind. Promiscuous users of the barbiturates often appear 'drunk.' Sometimes they appear drowsy, confused, unable to think or coordinate.

"The amphetamines, on the other hand, tend to

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elevate the mood of the user. If depressed when the drugs are taken his mood may become near normal. If taken in a normal mood he may be elevated to a point of excitement. Consumption while in an extremely good mood may cause hypernormal or explosive courage, extreme aggressiveness and abnormal sexual behavior.

"Our reports and studies on the drugs and their illicit use indicate that many young people (and for that matter, their parents) do not realize the dangers their use may bring about."

One has only to pick up the morning newspaper to agree most emphatically with Mr. Shake. The teen-age thrill seekers simply do not realize that they are playing with death and degradation, not discovery and delight.

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"Largest misuse of pills is through truck stops, filling stations, bars, restaurants, and other places where truckers are apt to frequent"—Lewis K. Lasher, Assistant to Director of Field Operations, Food and Drug Administration.

"This must be the heaviest fog in years," said the motorist, peering through the pea-soup fog that had rolled in across the New Jersey Turnpike.

"You'd better slow down some more, Fred," said his wife.

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"Well ... it is a 35 MPH zone."

"I can't see two feet in front of the car. Please, honey, slow down some more."

"Okay. I'm barely crawling."

The car inched forward through the dense fog.

Suddenly the harsh notes of a trucker's air-horn sounded behind the car. The motorist felt his car move with the wind as a large tractor-trailer sped past. He was followed by several more semis; lights on dim, engines revved and rolling through the night.

"They must be crazy," snapped the motorist's wife. "They're going too fast in this fog. They must be doing sixty or seventy miles per hour."

"They're truckers, honey."

"Their eyes are the same as ours. They can't see to go that fast. Besides this is a 35 MPH zone. They're speeding."

"Look, don't bug me. Truckers are the best drivers on the road. You never see a drunk truck driver. If a bunch of truckers are doing 60 or 70 in this fog it's because they can see better from those high cabs."

The car continued to inch along. Several minutes later, the motorist and his wife noticed a wreck ahead. It was a multiple truck pile-up; wreckage and cargo were strung over the turnpike and the moans of dying truck drivers could be heard amid the sheet metal and tangled wreckage.

Six truckers died in that wreck. The date was

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May, 1963.

Fourteen pep pills were found in the tangled mess of metal and blood.

Investigators said more than one "Knight of the Road" was hopped up on pep pills.

The New Jersey tragedy is symbolic of the growing menace of pep pills on the highways. Unfortunately, it is not alone. Police files reveal the death of an entire family on July 19, 1963, near Tipton, Iowa.

An Air Force sergeant, his wife, 6-year-old son and 8-year-old daughter stopped their small car for a traffic survey on the highway. They pulled to a stop behind a large tractor-trailer and waited as Iowa Highway Commission officials completed their survey of the trucker in front.

Suddenly, without warning, a large tractor-trailer came up fast behind the waiting truck and small car. It crashed into the rear of the car, driving it under the truck in front. The small car burst into flames and exploded before the sergeant or any member of his family could be removed from the wreckage.

"They just got shoved under like an accordion," said one witness. "They never had a chance. It was awful."

The driver of the speeding tractor-trailer was not injured.

Three bottles of pep pills were found in his suitcase in the truck cab.

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At first, he denied any knowledge of the pills, then admitted having purchased the dangerous drugs. He admitted having taken pills while on the trip.

Blood tests proved he was under the influence of pep pills when the accident occurred.

Another accident involved the deaths of five persons. It took place on the West Virginia Turnpike in the early morning hours of January 8, 1964. A tractor-trailer crossed to the wrong side of the highway and collided "head-on" with an oncoming postal van.

Both drivers were killed.

Three postal employees, working in the rear of the van, were also killed.

No witnesses saw the accident.

Officials sifting the wreckage discovered a container of pills in the truck driver's pocket -- they turned out to be "stay awake" caffeine pills and a generous supply of pep pills.

An analysis of the driver's stomach revealed he had been taking amphetamines. As his body had already been embalmed, there was no possibility of blood or tissue tests to determine how many the driver had consumed.

The Interstate Commerce Commission is the federal regulatory agency that polices the trucking industry. ICC officials are showing increasing alarm at the growing menace of pep pills being used by truck drivers. They cite the increasing number of single vehicle accidents involving

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trucks; 56% of the trucker death and injury accidents were incidents where no other vehicle was involved.

William K. Byrd, assistant Chief, Section of Motor Carrier Safety, ICC, reports truck driver use of pep pills has been increasing over the past 10 years. An ICC check of 21 trucks in Yuma, Arizona, found six truckers possessing pep pills. In one six-month period, the Massachusetts law enforcement authorities arrested 65 truck drivers for possession of amphetamines and similar dangerous drugs.

According to the Food and Drug Administration, fully 90% of illegal pep pill distribution in this country is either sold to, or sold by, truck drivers. Drivers have been found to be pushers themselves and illegal pushers are working in every section of the country. The FDA also states that the pushers who supply truck stops and truck drivers are the same ones who move pep pills into the teen-age market.

The Food and Drug Administration is the only federal body with regulatory powers to handle the pep pill menace. They admit that efforts are largely ineffective because changes are needed in laws pertaining to sale and distribution of the drugs.

Truck stops have customers from every section of society and they are excellent distribution areas for pep pills. Besides serving the truck driver market, they can also funnel pep pills

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into teen-age circles in their communities.

Last year, the FDA prosecuted 152 pushers; of this group, 78 were pushers at truck stops.

The heaviest concentration of pep pill usage is in the Southeastern section of the United States. This is because of the large number of independent (or "gypsy") truckers who are on the Florida-to-New York produce run. Some of the largest illegal pep pill distributors and pushers have been found in Tennessee, Georgia and those areas.

In the large wholesale produce areas of most Northern cities there are pills available from many sources. Most suppliers are found in the motels, truck stops and diners where truckers are frequent customers.

Co-author Warren Smith, posing as a pep pill addict, purchased match boxes of "Bennies" or Dexedrine in truck stops and diners in every state from Florida to New York. It was surprisingly easy to make a purchase; the going rate was 10¢ a pill.

One way illegal sales start is that truck drivers frequenting the establishments demand "stay awake" pills and employees or management see the quick, easy profits in pills.

Employees are often given a commission on the pills they sell to drivers; many have established a regular clientele of drivers. In some places, the owners sell them; in others, a waitress or station employee can pocket \$100 or more weekly by selling pills to drivers. In-

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frequently, there are transient pushers who drive up and down the highways, contacting drivers and making sales from his coat pocket.

Pep pills are sold in aspirin tins, match boxes, envelopes and, more infrequently, in glass vials or containers. Drivers usually pay around 10¢ each for 5 to 10 mg. pills. As the police have cracked down in an area, prices have risen to as high as 5 for \$1.00. The price always rises following the arrest of a big distributor in an area.

FDA investigators point out that truck stops involved in pushing are often the smaller, or medium sized establishments. At the larger truck stops, it is usually a dishonest employee selling on the sly rather than management involvement in the illicit drug traffic.

Many "fast buck" operations call themselves truck stops when they're actually one of the "Three P Places": Pinballs, pep pills and prostitution. These "so-called" truck stops will supply anything to customers -- for a price.

Typically, the "Three P Places" are low-grade, cheap operations with little or no connection with a legitimate truck stop.

To combat these illicit operations, legitimate truck stop operators formed the National Association of Truck Stop Operators a few years ago. NATSO membership has three rules: no pep pills; no padding of fuel bills and no prostitutes. Many NATSO members have investments of

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several hundred thousand in their truck stops; they're not about to jeopardize this investment for a few quick dollars in pep pill sales. But a dishonest employee may be pushing without management's knowledge.

There are also many good, well-managed smaller truck stops. Typical of these were small truck stop operators in Georgia who reported to law enforcement officials they were being strong-armed into handling pep pills. Some bootleg drug wholesalers were going to open new outlets -- over someone's battered body, if necessary.

Sometimes the pressure of his customers will force an honest operator to handle pep pills. A Southwest truck stop operator, long noted for his fair and honest reputation, was arrested for selling pep pills. "My truck driver customers said they'd take their business elsewhere unless I handled pep pills," he confessed to police.

Illegal pep pill pushing may have some involvement with the crime syndicate -- the Mafia, or Cosa Nostra -- although the Federal government reports no major interest in pep pills by top syndicate figures.

Sergeant Charles Moore, Illinois Narcotics Control Division, says: "organized crime is the source in a large number of cases." In an interview with Fleet Owner magazine, Sgt. Moore also stated: "We arrested a truck driver about two weeks ago, on a tip that he was carrying the stuff from East St. Louis to Chicago. We picked

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him up on a traffic violation, searched his truck and found about 80 benzedrine tablets -- some in an aspirin bottle and some in unmarked plastic containers. He told us that nine out of ten truck drivers have 'bennies' or some other dangerous drugs. So that gives you some idea of what proportions the dangerous drug problem may take."

"IT'S MIGHTY NICE TO HAVE A PILL TO GET YOU THROUGH THE DAY"



**"He'll take five or
six pills in a cup of
coffee"—description of
a heavy user.**

Fred Miller is a trucker; he's 34-years-old and has the squint-eyes of a man who has peered for thousands of miles into the sun. Or into the oncoming headlights of night time traffic.

He walks bandy-legged, wearing the black Wellington boots that are almost a symbol of the

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truck driver. He wears khaki pants and a roll of heavy stomach fat folds over his belt. He wears his pants low on the hip and hooks his thumbs in his belt while he talks.

Fred Miller is a heavy pep pill user.

He drives the fast-paced produce run from Florida, north into the metropolitan areas of Baltimore-Washington or New York City.

His wife and three adolescent children live in a small, but neat, frame house in the suburbs of Chattanooga, Tennessee. It's a good neighborhood -- better than the one Fred Miller was raised in -- but he wants to "move up on the mountain someday," either Lookout or Signal Mountains that surround the city.

Fred Miller, in the parlance of the South, is a "good ole boy."

"That Fred Miller is all right," says a skinny service station mechanic, swigging his Double Cola and pointing to Fred's rig. "Old Fred works hard."

"And he pays cash, too," said the truck stop owner, with a tone of reverence in his voice. "He ain't like some a them gypsies. All they wanna do is beat a man ..."

"Some of them boys have it rough," voiced the mechanic.

"So do station owners," answered the owner.

Fred Miller has been driving the East Coast run for seven years; he worked as a driver for a common carrier and moon-lighted in a service

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station to save up the down payment on his rig. His wife's father, a merchant in Crossville, Tennessee, loaned Fred the remainder of the down payment.

Fred was taking benzedrine to make it through the long days of moonlighting; he stayed on pep pills when he started the long hauls from the fruit and vegetable fields of Florida to the dinner tables in the North.

After convincing Fred Miller of our purely "writer's interest" in his pep pill habit, he admitted to being a heavy user. This had been previously confirmed by a truck stop waitress who sold him the vast quantities of pills.

"He'll sit and dissolve five or six pills in a cup of coffee," she said. "Doesn't seem like he should take that many but it don't seem to hurt him."

We tape recorded an interview with Fred Miller and he told of his pep pill usage in his own words. As he was "high" on pills at that time, the tape has been edited to eliminate superfluous conversation:

Fred Miller: "Now, boy, just be sure and don't use my right name or the ICC inspectors'd be down here on top of my tail in a minute.

"Sure, I use the pills. Buddy, you got to. This is a tough business and we're dealing with fruit and stuff that might spoil. Sometimes I'll take on a load in Florida that oughta be in the store already; maybe I ain't making much on the load

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cause the seller ain't making much on the deal.

"I got the stuff on the back of the truck and its go-go-go to get it to market. Mess around a couple nights in a motel and you got rotten fruit and nobody is gonna accept that.

"'nother thing, it's a matter of money. I'm what they call a gypsy operator -- I own my own truck and my own trailer. I'm my own man. Make my own decisions. It's great to be independent but it also has a few problems.

"Like the payments on the jimmy rig of mine run pretty darn high; and that ole banker don't like to see them get behind. I almost had a rig taken away by the finance company. That one was too close. It ain't gonna get that close again.

"So I gotta make payments on the rig. And you ever priced the cost of a truck tire? I tell you, they are not very cheap. And I won't endanger myself or the load with a bunch of 'skins' that should be in the junkyard.

"So, it's always money. So much a week to keep the truck, maintenance, operation costs and overhead. Living expenses for the wife and family.

"Every time I run a load through a couple days early, I'm a couple hundred ahead. The pills help me do that.

"Most of the truckers I know take them. I been on runs to Texas and once up in South Dakota, special hauls, and they're all over.

"Most of the guys take these five or 10 em gee

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(mg.) tablets. Me? I like the capsules cause a tablet ain't good enough. If a guy has been driving all day, one of them 'five or dime' pills will keep him going another four or five hours. If it's a long haul, you can't keep track of how many you been taking or when they're gonna wear off. And you always got to keep popping them in your mouth -- like peanuts or popcorn.

"On the other hand, if I can't get a capsule, I'll take four or five itty-bitty dexxies in a cuppa coffee and they'll give me the same effect as a couple capsules.

"Now, the truckers like capsules anymore. I find more and more guys like them. See, some of the bennie pills look about like a No-Doz pill. Some smart boy can fool you with them and you paid your money for nothing.

"The capsules are two to four times stronger, I would judge. One will last me about eight hours now; course I been taking them a long time. A beginner could get maybe 12 to 20 hours out of one. (These are Dexedrine capsules, or "span-sules" and they're usually 15 to 30 mg. size.)

"A lot of the guys like a certain color. Man, sometimes you get to comparing and they're all the colors of the rainbow. Pink ones, the itty-bitty heart-shaped pills, the big green capsules, yellow, red -- you name it and they got it.

"I think it is pretty easy to spot a heavy user like myself. We're always pretty nervous, and we're always drumming on the table or moving

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around. See, I'm taking my fingers and cracking them right now.

"Your eyes get squinty and it's pretty easy to start sweating. Most of these pills are used to stop fat people from eating, you know. That's how the Dexedrine got started. You don't feel much like eating anything when you got a bunch of pills in you. But you sure like your coffee. I usually carry a thermos bottle and just sit there in that sweet ole Jimmy (GM truck) and drink coffee, listen to the radio and chain-smoke.

"I have heard of drivers taking too many of them and going nuts -- but personally I have never seen anything like that. Somebody said there was an old boy who drove from Florida to Chicago on them, which ain't too bad a trip, and he musta taken too many or something. He got into Chicago and started banging his truck into parked cars, driving down sidewalks and ever'-thing. I'll bet those Yankees knew that rebel had arrived, huh? They said the cops had to stop him with guns. Ain't that something?

"Another thing you can use to spot a man who is using them is that he is always talking. Like me running off right now. Seems like you never want to shut up. Maybe it's cause we're in that truck cab all the time and never got nobody to talk to.

"I use the pills for my runs. Usually leave Chattanooga here and drive to Florida for a pick-up and catch some sleep down there. Then I pull

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straight through to wherever I'm going in the North. Get there, and get home. I can go two days and two nights without sleeping when I'm on pills. After that I begin to start seeing things. That's no good. You can kill yourself. But I figure you can do a lot of driving in 48 hours.

"Most everybody I know takes the pills, even the guys who just have a regular little run around here. Chattanooga to Nashville or something like that. He don't have the problems of the over-the-road trucker, fighting time and money, stuff like that, but maybe he went out to a joint and got all likkered up over the weekend.

"Monday morning rolls around, it's mighty nice to have a pill to get you through the day. Mighty nice.

"I been taking them for about ten years now and I ain't got the habit yet. I don't figure they are habit forming.

(laughter.)

"Yeah. That does sound funny. Taking 'em for 10 years and ain't got the habit. But I don't take them when I'm home; just sit here in the sunshine and let the energy crawl back into my body.

"What I'm hoping to do, of course, is get enough money ahead to move into a nice place up on the mountain and have enough left over to get into some kind of business. Might try a service station, 'cept everybody around here likes to charge it too much. Wife's father is getting kinda

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old and we might move over to Crossville or somewheres over in there sometime ... maybe buy me a root beer drive-in or something.

"You know, the kids are growing up and I don't get much chance to see them. If you're gonna write a story 'bout the truckers, you write it down in great big letters that it ain't much of a life.

"I guess I worked hard for every dime I made or spent. Seems like some guys make it pretty easy -- but not me. But I sure don't want to be fifty years old and rolling down the highway with my rig and a bottle of pills.

"You know how it is?"

* * *

Several months after this interview, Fred Miller was making his usual haul out of Florida when he fell asleep at the wheel on a winding North Georgia highway. Fortunately, he was not killed and he escaped serious injury. His tractor-trailer was demolished.

The last we heard, he was working days for a contractor in Chattanooga and was moonlighting at night in a service station.

He is still taking pep pills to keep going.

INTO THE DRUG UNDERGROUND

8 Warren Smith, co-author of this book, entered the dim unreasonable world of the drug underground several months ago and posed as a pep pill addict. His goal was to discover the availability to addicts of amphetamines, barbiturates and other drugs. A secondary goal was to discover the inner workings of the illegal drug distribution patterns in this country.

The "drug underground" is a world populated by people with problems. It is a world where logic and reason are only words in a dictionary. In this almost unknown underworld, where excess is the rule and moderation is for squares, one finds a world of predatory violence, potential and

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actual lawbreaking and everyone lives on pills.

I found that buying dangerous amphetamines and barbiturates is as easy as purchasing a pack of chewing gum. Whether it is Decatur, Illinois, or Mason City, Iowa, Ft. Lauderdale, Florida or Fort Worth, Texas, the pills are available for a price.

I checked with police chiefs and law enforcement agencies throughout the country and discovered their concern with this growing, explosive traffic in illegal drugs.

They reached into thick police files and brought out case histories of pill problems in their towns:

- *Two nurses who falsified patient records to obtain barbiturates.

- *A 12-year-old girl, raped by a gang of boys who were hopped up on pep pills.

- *A high school teacher who was hooked on barbiturates and used his teaching salary for drugs and shoplifted for his other necessities.

- *The daughter of a socially prominent West Coast family who returned from a "deb" party in a drug-induced stupor.

- *A 15-year-old girl, who had run away from her home in New Jersey, and was living with a drug addict in the Southeastern states.

- *A teen-aged Chicago youth, son of a law officer, who headed west with four other boys and girls in a stolen car. Burglarizing a store in Idaho, they were approached by a deputy sheriff and they murdered the officer.

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*A 35-year-old printer in Portland, Oregon, who started "moonlighting" three years ago, using pep pills to keep going. One night, after several days without sleep, he attacked a customer in the store of his employer and was committed to a mental hospital.

My notes made it appear that drug habituation and addiction in this country were reaching epidemic proportions. I found it hard to believe my own research. Time after time, I asked narcotics detectives: "Is the drug problem as bad as I've found it?"

"It's worse," was the inevitable reply.

State patrolmen and highway safety officials voiced their concern about the growing menace of "pilled-up" truckers. "Nine times out of ten we'll find pills after a truck wreck," reported one state trooper. "It's worse than liquor in highway deaths, if the truth were known."

Principals in metropolitan schools, particularly those in slum neighborhoods, whispered their concern about pilled students.

"I started to shake down a gang one morning and found a knife at my throat," shuddered a youthful assistant principal. Since then, he leaves the pill crowd alone. "I have a wife and baby," he said. "And you never know what a bunch of junkies will do."

Wherever I went, it was easy to get pills. Kids mix them with beer for kicks, truckers use them on long hauls and they're used by people in all

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strata of society.

Hard narcotics addiction is most frequently found in slum-ridden neighborhoods. But pep pills and goofballs are often found in the best neighborhoods.

Entering the "drug underground" is comparatively easy. Contacts are easy to establish and an atmosphere of informality makes it simple for the newcomer to make a "buy." Narcotics detectives and law enforcement officials were outraged and bitter about the laxity that exists in laws concerning these drugs.

My first movement into the unreal world of the pill taker was a meeting with an 18-year-old youth in Louisville, Kentucky. He was far gone in his addiction to pep pills and was "switching" on and off with barbiturates.

The youth, named Tom, was the son of a railroad worker and had been taking pills for three years, having started the habit in 1961 when he was 15-years old.

Tom was hopped up on dexedrine when we met; he paced the floor of his parents' home and talked rapidly, often incoherently. A family argument was in progress -- apparently an old one -- on the possibilities of Tom entering a state hospital for treatment of his habit.

"Why do you take the pills?"

"They make me feel good. I'm nobody, mister, when I'm off pills. I'm not smart and I ain't nothin' but pore white trash --"

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"That's not so, Tom," his mother admonished. "We're decent, law-abidin' folks," she said, turning to me.

"Naw. We live in this crummy house in this lousy neighborhood and the ole man works his tail off on the railroad. What kinda future is that, man? So I take a few pills." His face showed the ravages of prolonged addiction; pinched, sunken-eyed, skinny.

Tom's habit is financed by family funds and he purchases his supply of pills from an unscrupulous doctor in Louisville, a man known to write prescriptions or sell pills to addicts.

After Tom had left to walk downtown, his mother said: "We're frightened of our own son. I sleep with a knife under my pillow and his dad has a gun in the bedroom."

Some months earlier, when his mother refused to provide extra money for his habit, her son threatened her with a hammer.

"He got the money," she said, sadly.

His mother had discovered that the pep pill addict is filled with excessive, often violent, energy. He is potential "bad news" to anyone near him and he may explode into irrational rage at any moment.

In contrast, after a fix the heroin addict goes into a dreamy, visionary state called "on the nod." Addict jargon calls the pep pill state "on the prod," which illustrates the differences. The pep pill addict is a far more dangerous in-

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dividual under the influence than his hard narcotic cousin.

After obtaining the money from his mother, Tom purchased a supply of dexedrine, Seconal and Methedrene (called "water"), all dangerous drugs. He split the pills with a friend and they went on an orgy lasting several days and ending only when Tom's companion was taken to a clinic, unconscious from an overdose of barbiturates.

During my months of investigation, I heard hundreds of heart-breaking stories from addicts, their parents or read them more impersonally from police files.

Teen-agers, hooked on amphetamines or barbiturates, are the most pathetic instances of addiction because of their age. Their parents are grief-ridden, have a feeling of inadequacy and guilt and are bewildered that such potentially dangerous drugs are treated so casually by law-making bodies and our legislators.

A case involving a young suburban housewife hooked on barbiturates was brought to my attention by a doctor in Indianapolis. "Talk to her husband," he said.

I met the husband at a pre-arranged time in the doctor's office. He had the worried, harassed look I came to associate with the relatives of "pill heads."

His wife, 27 years old, had left home three days previously and he had not heard from her.

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"God, I've tried, I've really tried. But I'm about ready to give things up for the children's sake and try and give them a normal life."

He paused, lit a cigarette. "You know, I never knew a narcotics addict before. I'd rather see her in prison or -- even dead!"

The doctor started to explain that barbiturate addiction could not be classified with heroin, cocaine or hard drugs. The youthful husband and father was not mollified.

His story was similar to many I heard over the months. His wife had been a good woman; after the death of her mother and father in an accident, she had been prescribed sleeping pills to calm her worried nights.

The family doctor -- not the young doctor present in the room -- had given the young woman a prescription that could be refilled whenever she wished.

The woman began to sleep many hours of the day.

She was often in a state of confusion when awake and moved about slowly. She lost interest in taking care of the house and even in caring for her children. She began to take larger doses of pills and, eating irregularly, lost weight rapidly.

"Now she hates me -- and the kids," wept the husband. "When I come home the house is filled with strange men and women and they're a bad looking bunch. She comes and goes at all

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hours and I never know where she is or when to expect her."

"What's she taking now?"

"There are some blue and white pills and some red ones and some she calls 'yellow jackets.' Last week I found some needles in her purse," he said.

"This means she's taking it intravenously," the doctor declared.

The husband had sought help from several doctors, hopeful of finding a possible way of curing the addictive habit of his wife. Short of commitment to a state mental hospital, it was doubtful there would be any progress in her case. Commitment proceedings had been tried twice, unsuccessfully.

Later, the doctor reported the husband had left his wife, filed for divorce and gained custody of their children; he had heard the young woman had left the city for the West Coast.

Have you ever been to a "pill party?"

They're the swingiest things these days, particularly among the pep pill and goofball set. Five dollars spent on bootleg pills will give a blast to a trainload of people; you don't need too much liquor to keep the glow going.

A pinch-faced, 20-year-old pill head was my guide into this world of "thrill pill" living.

The scene was a Los Angeles apartment. It was shortly after midnight when we arrived and

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the room was filled with young people, all hopped up on pep pills or goofballs.

It was a slum neighborhood and, later, I was told the party host rented the apartment exclusively for these "week-enders."

Smoke hung from the ceiling and drifted around a single light bulb hanging down from the ceiling by dirty yellow wire. The windows were smudged with the dirt and smudge of several years. Someone had brought a portable stereo: music bounced off the dirty walls and slammed against the eardrums of the normal listener.

"... you oughta try it with a needle."

Two young males, clad in slacks and T-shirts, were embracing in a corner.

A tall, thin girl slumped against the wall beside them, eyes closed and a smile on her face.

"... gimme another bennie."

Several teen-aged youths, hair long and shaped in the style of their idols of the bandstands, stood in a group. They moved in jerky, jittery motions and were dressed in the sport shirts, tight, beltless pants and pointed black shoes.

"... someone mix me another drink."

A 17-year-old girl staggered toward the bar. She was an attractive, blonde girl and her eyes revealed the glazed, droopy look of the barbiturate user. Later, she revealed she was pregnant for the third time. Her two previous children, fathers unknown, were adopted before she had seen them.

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"Live a little, man, live a little."

"... anybody using the back room?"

"... I like those red ones the best."

"... man, I'm on the prod. Let's roll out and take a drive."

"... sure, I told my old man, I'm a needle nut. All he did was sit and cry."

"... I started taking dexedrine in the 7th grade. Anybody top that? Hey, listen ..."

"... believe me, man. Until you feel it, you ain't never gonna understand it. It's a feeling like you never had before. You are IT. You are IT."

"... it's the cheapest drunk in history. I get mine for 5¢ a piece; 20 drunks for a dollar. Another year or two and the distilleries will be out of business."

* * *

It was a junked-up, sloppy slum neighborhood in Atlanta, Georgia. Empty whiskey bottles littered the yard and the weathered remains of a plastic bird bath lay half-imbedded in the red clay soil. Despite the hot summery weather, no blade of grass had fought its way through the litter and garbage covering the yard.

Inside the unpainted, slab-board house, the atmosphere was no different. Dirt, filth and garbage was everywhere. Dirty dishes filled the kitchen sink; several had toppled to the floor and

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were broken.

Several men slumped or sat in the four-room house, in various states of drug-induced stupor. They were on barbiturates, lazily moving their way toward the black darkness of nothingness. Total void. Zero.

"Yes, sir?" asked the tall, thin man in a sweaty undershirt and dirty, filth-encrusted pants.

"Are you the doctor?" I inquired.

"Who are you?"

"A guy over at the tavern said you would fix me up. I'm on vacation down here and need some pills." I mentioned the contact's name.

"What do you need?"

"Water ... Methedrene. Thirty amps."

"That damned stuff will kill you," the doctor said. "Besides, I ain't got any."

"What have you got?"

"There are some 10 cc bottles of Drinalpha in back. \$3 each."

"I'll take them. How about Dexedrine and Seconal. You got any of that?"

"I can give you 20 Seconal for \$2 and there are a few Nembutal capsules around someplace. I'm out of Dexedrine. My clientele --" he waved his arm with a wry smile toward the dropping men on the garbage strewn floor -- "don't care for stimulants."

I told the "doctor" I would take the Seconal and Nembutal, paid for the barbiturates and left the house. During subsequent visits, I discovered

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he was a disbarred medical doctor from the North, who had narrowly escaped a lengthy prison sentence when a young girl died on his abortion table.

He arrived in the South, with little money and a strong addiction to barbiturates. Buying pep pills and barbiturates from illegal, bootleg distributors he managed to support his own habit and prospered from his growing 'clientele' of barbiturates addicts in the city.

"Some of the nicest people in town come down here for pills when they can't get them no place else," he said in the half-Yankee, half-Southern accents of the transplanted American.

Anywhere in the country, I discovered it is a fairly easy process to obtain a prescription for dangerous drugs from a doctor. One out of eight will usually write a prescription, to order. By avoiding the crowded clinics and concentrating on the doctors in low-rent, semi-slum neighborhoods, these odds can be increased.

A few "renegade" doctors make a practice of writing prescriptions for addicts, no questions asked. There is nothing illegal in a licensed doctor prescribing drugs for a patient and they lean on this void in the law and often build a thriving practice. As an example, there are approximately 50 doctors in Chicago who can be "persuaded" to write a prescription for either a stimulant or barbiturate drug.

Typical of the casual way some doctors will

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open the doors of death for patients was a visit I made to a physician in Omaha, Nebraska.

His office is in the seamier side of town, almost in the midst of Omaha's "skid row" section. It is dimly-lit, cluttered with old magazines and newspapers.

A hard-faced, aging bottle blonde sat at the receptionist's desk. She tugged at the heavy corsets strapping in the fleshy folds of her sagging figure as I walked through the door.

"Hello. The doctor will be with you in a minute."

We waited silently. She tugged occasionally at the corset. It's a losing battle, lady, I thought.

After a few minutes, although no one had left the office, she said: "The doctor will see you now."

He was working a crossword puzzle in the Omaha World-Herald. Wrinkled, aging skin was topped by a thick thatch of greying hair. He was equally as fat as his aging blonde; she had the advantages or disadvantages of wearing the corsets.

"What can I do for you, young man?"

"Doc, I -- uh -- need some Dexedrine and Seconal."

"Who sent you?" he asked, suspiciously.

"Nobody. I just picked your name out of the phone book. I'm from out of town."

"What do you want with that crap?" he asked.

"I'm a salesman and have to drive a lot. The

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Dexedrine keeps me alert."

"It'll kill you, too."

He began to write the prescription on a pad. He handed it to me, saying, "That'll be \$4."

"I need the Seconal, too, Doc."

"Jesus Christ! I'll get in trouble."

"But I need something to calm me down if I take too much of this stuff," I said, flashing the pep pill prescription.

He wrote "Seconal, 30s" on the blank. "Take these down to the drug store on the corner. He'll fill them. That'll be \$8."

I counted out a \$5 and three \$1 bills and handed them to the doctor.

He went back to marking the crossword puzzle with his ball-point pen.

Having found out that prescriptions, while difficult, were obtainable from doctors I began an investigation into the retail bootleg market.

In a truck-stop in Missouri, I walked into the noisy, grease-smelling atmosphere as a juke box blared the noisy squalls of a hillbilly singer. It was a dingy place, napkins on the floor and the stools and tables were scarred, carved and battered. Two truckers were exchanging views on Viet Nam; outside, their load of hogs -- destined for the slaughterhouse -- were squealing their disapproval of the unfairness of life.

"Whatcha want?" a washed-out waitress of forty asked, shoving a plastic glass of water toward me.

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"Coffee. Black."

"I say we oughta go over there and bomb hell outta them Chinese bastards," said one of the truckers.

"Maybe they'll bomb back," said the other.

The waitress brought my coffee. She smiled. "It's like that 'round here all the time. They know better'n the president on how to settle the world's problems."

"This is good coffee," I commented. "I've been driving all night and have another 600 miles to go."

"Rough," she said.

"I do it every week or two. Usually got some pills to keep me going but I run out th' other day."

She asked me a few questions. Where was I from? What did I do? ("I'm a cattle buyer, Ma'm.") Where was I headed?

"I'll fix you up so's ya can finish th' trip a bit easier," she said. "You got a dollar?"

I gave her a crumpled bill.

She put a large, dark, small-mouthed jar on the counter. "You get to keep all ya can get out with one hand," she said, grinning. "It's my way of giving ever'body a chance."

"A joy customer again, Mollie?" laughed a trucker in the background. "Be careful there, buddy. You won't get over two or three pills."

I reached into the jar, scooped up a handful of pills and discovered it was impossible to with-

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draw my clenched fist through the jar opening.

A second try, holding a few pills cupped in my fingers, succeeded.

Six Dexedrine capsules hit the counter.

"Not a bad haul," commented the trucker.

"Ya got small hands," said Mollie, grinning. "See, that's my own private little gimmick. It puts my girl through school. Buys her some nice clothes. Lets that little girl be somebody."

"Sell a lot of them?"

"Fifty or sixty truckers use that black jar every week," answered Mollie.

"She's always got a supply, too," said a trucker, pulling on a jacket over his shoulders. "Never have to worry about long hauls when Mollie's Black Jar is waiting here."

I left the restaurant, thanking Mollie. The trucker fell in step as we walked out the door. The air was clean country air -- filled with the rich odor of hogs, pigs, diesel gas and petroleum.

It was a grubby little truck stop.

And a seemingly nice woman, born and living on the hungry side of the dollar, had found the perfect way to educate her daughter.

She sold death by the handful.

I recalled a comment by Dr. Francis J. Gerty, professor of psychiatry at the University of Illinois and once the state director of mental health for the State of Illinois.

He was describing the effects of amphetamines and barbiturates: "Either interfere with the

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highest function that man has -- the cortical function of the brain. Abuse of these drugs weakens this function ... where the entire pattern is deranged. Animals won't take them -- they know better. Only men will -- animals don't have brains."

Mollie, the waitress, like others, was finding there were big profits in pep pills or goofballs, without too large a penalty should they be arrested.

Trafficking in "hard" narcotics -- heroin, cocaine, morphine, opium -- carries stiff penalties for the pusher. It is a felony and a pusher may be sentenced to as much as life in prison. Possession of hard narcotics carries a maximum 10 year prison penalty. The risks in handling these narcotics makes them very expensive and an addict spends from \$20 to \$100 daily to satisfy his addictive habit.

Illicit distribution or pushing of amphetamines and barbiturates is treated much more lightly by lawmakers and carries only the lesser penalties of a misdemeanor offense. As the pills are easy to obtain and the "heat" is not on the pusher, a hardcore "pill head" can get by for \$2 to \$5 per day. A beginner can often get a buzz from a single Dexedrine capsule -- costing as little as 10¢ on the bootleg market. A novice need spend no more than 50¢ a day for a full 24-hours of drug-induced "switching" -- pep pills, followed

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by sleeping pills.

Barbiturates -- like hard core narcotics -- are habit forming. They can be as dangerous as heroin to the user; in a short time, the user can build up almost total dependence to the drug.

Some authorities feel that in America, it is easier to kick the heroin habit than barbiturates. "The heroin sold in this country has been 'cut' -- or diluted -- so many times that the habit is more psychological than physical," one authority feels. "This isn't true of barbiturates; the addict is receiving a full jolt every time."

What are the pills like?

Barbiturates are pain killers. Seconal provides a quick "jolt," then there is a veil across your brain. You appear to be thinking and acting with more insight than your normal state; you view the world through rose-colored eyes. Anything seems possible.

These are the mental effects. Physically, you become numbed, tired and sleepy. Eyelids begin to droop, and you enter the period of muscle relaxation.

If the user fights the deadening effects of the drugs for, say, an hour, there is a feeling of physically and mentally reaching -- but never quite achieving -- a state of nirvana or total happiness. The danger of these drugs is that the user always feels this happiness can be reached by just one more pill. This, perhaps, explains the high rate of suicide among barbiturate users;

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too many people looking for happiness at the bottom of the bottle. The brain just goes to sleep. The last sleep. The big one.

By contrast, amphetamines stimulate and excite the user. Pep pills bring the individual up into a state of constant, high-pressure tension and nerves are taut and the pill head is said to be "on the prod."

Taken in smaller dosages, as normally used by truckers, the pills keep the individual alert and awake for many hours. Too large a dose -- or extending the period of the dose to include several days -- yes, that is correct -- can lead to hallucinations, wild visionary mirages and potential violence.

Prolonged doses often make the user suspicious of people -- a man may go berserk and start destroying everything and everyone in his path. These pep pills are likened to cocaine in their ability in large doses to excite the user, I'm told by addicts who have experienced both drugs.

Here are my notes on reaction to a beginner's dose of Dexedrine, taken under doctor's supervision:

"... feels like I have a big generator in my guts that is pushing me on ... really feel good ... believe I can stay awake forever ... eyes blink more often ... need for greater intake of liquids ... more trips to the bathroom ... feel like I'm above myself and viewing myself as a

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participant in a play ... muscles tense ... sense, hearing, smell, taste, seem sharper ... nervous, jittery ... have to keep moving, even sitting down I'm tapping my foot now or doing something like that ... a cheap drunk with the side effects of alcohol ... no appetite ... don't want food."

Although it was a very small dose of Dexedrine, I was using energy from the body reserves. It was two days before I felt normal again; in the interim, there was a depressed, dragged-out feeling.

Under doctor's prescription, Dexedrine can be an effective drug for appetite suppression and for treatment of serious mental depression. Having experienced the drug for one time -- under the watchful eyes of a physician -- I can understand the ease with which a casual user quickly becomes a "needle nut" or a "pillhead."

THE BILL AND THE PILL

9

**"An otherwise law-abiding citizen may go berserk under the influence of psychotoxic drugs and become a menace to himself and to society."
George P. Larrick,
Commissioner of Food
& Drugs.**

On August 3, 1964 the Subcommittee on Health of the Committee on Labor and Public Welfare of the United States Senate met in room 4232, New Senate Office Building with Senator Ralph Yarborough, acting chairman, presiding. The purpose for the hearing was the discussion of S.2628, a

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bill to protect the public health by amending the Federal Food, Drug and Cosmetic Act to regulate the manufacture, compounding, processing, distributing, delivery and possession of psychotoxic drugs.

The first witness called by the subcommittee was Mr. George P. Larrick, Commissioner of Food and Drug Administration, Department of Health, Education and Welfare.

Larrick cited the existing law as "inadequate." He noted that psychotoxic drugs "have been subject to widespread abuses. Their nonmedical use has contributed to the rising toll of deaths on our highways, juvenile delinquency and promiscuity, and violent and bizarre crimes."

Quoting directly from Larrick's testimony: "An otherwise law-abiding citizen may go berserk under the influence of psychotoxic drugs and become a menace to himself and society; he may participate in mass violence while abusing the drugs; and, it is not uncommon for hoodlums who are planning a robbery or other criminal acts to take amphetamines to bolster their courage.

"In Houston, an ex-convict shot and killed a schoolteacher, assaulted a 14-year-old farm girl and committed two robberies while under the influence of amphetamines.

"Widespread abuse of barbiturates and amphetamines has been fostered by the ease with which they are diverted from legitimate drug

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channels. (The present laws require habit-forming stimulants to meet certain standards as to strength, purity and quality. They demand that such drugs be labeled: "Caution, Federal law prohibits dispensing without prescription.")

"These controls are no longer adequate to prevent widespread illegal sale of the drugs. What is missing here is adequate control over drugs which cannot be proved to have passed in interstate commerce, adequate provisions to restrict these drugs to the legitimate channels of prescription drugs, adequate recordkeeping and inventory controls, and prohibitions against possession by persons for nonmedicinal use and distribution."

The FDA commissioner's testimony pointed out that as early as 1951, the Subcommittee on Narcotics of the House Committee on Ways and Means considered subjecting barbiturates to controls similar to those applying to narcotics such as opium and heroin. Evidence was presented to establish that barbiturates had addicting properties, resulted in serious withdrawal symptoms when the drugs were discontinued and posed the hazard of accidental overdosage and death.

"Indeed, barbiturates were shown to be a major cause of accidental death from poisoning--where the patient's brain was 'put to sleep' by overdosage." Dr. Paul B. Dunbar, then Commissioner of Food and Drugs, believed that narcotic-type controls were needed since bar-

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biturates were being used in the same illicit manner as narcotics, were being distributed through bars, motels, houses of ill repute and similar outlets, and the investigative and enforcement techniques needed to apprehend the vendors of such drugs were the same as those used by the Bureau of Narcotics against narcotic violator."

In speaking of the investigative work of the FDA, Larrick told the subcommittee of the risk of undercover work among pushers and users of barbiturates.

"Our undercover investigations start when we receive information from a variety of sources indicating serious violations. State and local officials participate extensively in this work. Our district offices receive many times more leads to illegal drug sales than we can pursue. The illegal sale of prescription drugs constitutes the largest block of serious and deliberate criminal violations we uncover each year. In the 12-year period ending June 30, 1964, over 2,100 firms and individuals were convicted of illegal sales of amphetamines or barbiturates. This is an average of over three convictions per week since 1952, and the rate is increasing.

"In recent years our investigations have become increasingly hazardous. Inspectors who engage in undercover work often put their lives in jeopardy because hardened criminals are taking over these rackets.

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"Our agents, undercover agents, have been informed repeatedly by drug bootleggers that the latter would kill them if they turned out to be Government men.

"Over one-half million amphetamines and barbiturates were seized in 1961 when an undercover buy was made from the supplier of a syndicate making wholesale distribution of millions of tablets throughout the Southeastern United States.

"Nearly one million amphetamine tablets were seized in November 1962 from a man who offered to sell FDA and the Tennessee investigators, working together, one-half million tablets at a time. Cases in which peddlers offer to sell tens of thousands of tablets per transaction have become fairly commonplace."

At this point in his testimony, Larrick produced a photograph of the drugs which a FDA undercover agent purchased in a single buy from a North Carolina bootlegger. Over 100,000 tablets were involved in the transaction.

SENATOR YARBOROUGH: I notice that you have different colors, red, white, orange, green and black.

MR. LARRICK: The drugs are the same, but they just are different colors.

SENATOR YARBOROUGH: Are not the properties relatively the same or are they vastly different in those different colors?

MR. LARRICK: No; the different color does not

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make any difference in their characteristics. They are capable of overstimulation and causing various types of harm which I have described.

SENATOR YARBOROUGH: At what price did the bootlegger sell at wholesale? Do you have the figures?

MR. LARRICK: It was running at about \$30 a thousand.

SENATOR YARBOROUGH: About \$30 a thousand to bootleg it?

MR. LARRICK: That is right. He could buy them at a dollar a thousand.

SENATOR YARBOROUGH: And those 100,000 will sell to the retail trade at what price?

MR. LARRICK: 5 to 10 cents per tablet.

Senator Thomas Dodd, author of bill S.2628 and persistent fighter for federal legislation controlling the sale and use of barbiturates, was called upon to state the provisions of the bill.

(1) Manufacturers, compounders and processors of barbiturates and amphetamines be required to register their names and addresses with the Department of Health, Education and Welfare.

(2) Manufacturers and others engaged in receiving or disposing of such drugs be required to keep records of the quantities of such drugs they handle and make these records available to food and drug inspectors.

(3) Adequate authority to be given to drug inspectors to inspect establishments, inventory

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stocks, vehicles and other facilities relevant to the proper investigation of the disposal of drugs.

(4) Possession of these drugs be illegal, except if the drugs are for one's own use or for the use of a member of his family.

In emphasizing the seriousness of illegal trafficking in these drugs, S.2628 calls for more severe penalties for those found selling to children and teen-agers.

The subcommittee has held seven major hearings on drug addiction throughout the nation.

We found that during the last five years, the illegal use of the billions of these pills which have flooded this country, has reached epidemic proportions. The results of this traffic which have come to our attention, revealed the following picture:

The illegal use of these drugs is increasing at a fantastic rate among juveniles and young adults.

The use of these drugs has a direct causal relationship to increased crimes of violence.

The use of these drugs is replacing, in many cases, the use of the 'hard' narcotics, such as opium, heroin and cocaine.

The use of these drugs is more and more prevalent among the so-called white-collar youths who have never had prior delinquency or criminal records.

The use of these drugs is increasingly identified as causes of sexual crimes.

Chairman Yarborough questioned Commission-

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er Larrick concerning the channels through which the drugs reached the public and what proportion of them reached the public legally and illegally.

MR. LARRICK: Accurate, statistically sound figures dealing with any completely illegal operation are impossible to obtain. But taking the best figures that we have, it is our view that on the order of about 50 percent of these drugs manufactured in the United States are not used in legitimate medical practice, either in private practice or hospitals or otherwise where legitimate medicines are prescribed and consumed.

SENATOR YARBOROUGH: About 50 percent?

MR. LARRICK: About 50 percent.

SENATOR YARBOROUGH: Well, take roughly a population of 190 million, say 200 million as a calculation; with 9 billion of these pills being consumed a year, what is that, about 45 of these on the average, or 45 a person per year?

MR. LARRICK: Somewhere between 45 and 50 but, of course, the percentage of the people who actually consume them improperly is small, compared to the total population, so the people who do take them tend to take a great many.

SENATOR YARBOROUGH: Are there any statistical tables or has data been accumulated showing to what extent these are distributed through motels, not to truck drivers, but to people driving across the country who are fatigued? Are these sold commonly like cokes and

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things, to pep people up as they drive along?

MR. LARRICK: I do not think they are sold commonly, but I think that there is no question but that there has been extensive use of them by young people who are out for a thrill or a binge.

We have records of disturbances at dances where the inciting to the fighting and other unsocial acts was unquestionably stimulated by the taking of these pills.

We know of instances where college students who normally are quite well-behaved people, at examination times take the amphetamines to stimulate themselves to what they hope will be better grades, and sometimes they take too much, and they do themselves harm.

There have been drivers, entirely apart from the trucking industry -- perhaps we overemphasized that, because it is very large -- but unfortunately there are many circumstances where people who know about them, and know how they can get them and want to drive long hours do it, to their detriment.

There are certain types of entertainers who wish to stimulate themselves to great flights of competence and excitement in a performance who have taken amphetamines and some of these people in various categories get to the point where they take the amphetamines to stimulate themselves and then when it comes time to sleep they cannot sleep, so they take a barbiturate to

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put them to sleep, and it becomes a vicious cycle that eventually destroys them, and I think it is common knowledge that very famous people have used the barbiturates to commit suicide and we quite often find when we investigate these cases that these people for one reason or another have a history of excessive use of drugs.

It is only fitting that we should allow Senator Dodd to have the last words.

"There is an educational job needed here and the job must be done. But the situation is really so critical that if we proceed to do this by education, which, of necessity, will take a considerable period of time, it will take years and years in my judgment, to educate all of the elements in our population so that they desist from the kind of conduct in which they are now engaged. We just won't get anywhere with the problem.

"... we have to tighten up the law with the respect to the situation. we must beef up, if I may put it that way, the educational program. It should be in the schools and everywhere where young people gather, bringing to their attention in the most forceful way, from an educational standpoint, the dreadful harm that the abuse of these drugs will bring on individuals and our whole society.

"But to say we should not do any more than that is to say nothing, in my opinion, and I cannot

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really find words strong enough to express my disapproval of that course of conduct.

"The house is on fire, and we do not need a lesson in how to prevent the starting of fires. What we need now is to put the fire out and go on with our fire prevention work. I think that is just about where we stand."

It is the authors' fervent hope that the passage of the current bill before the Senate will effectively conclude Senator Dodd's long fight against the illegal use of pep pills, goofballs and other dangerous drugs.

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No matter where you live in this broad country, whatever your age, sex or interest span, someone you know well has already begun to suffer. For the facts you must have to deal with this problem as current as today, you must read this compelling book!

